

# 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>34</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>	
	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 #301 San Antonio TX 78231</b>			Date Received	
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 #	Amount \$
	NICKNAME	LAST	SUFFIX	Date Processed	
				Date Imaged	
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	8th Day Before General Election				
10 PERIOD COVERED	Month Day Year 3/28/2023		THROUGH	Month Day Year 4/26/2023	
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year 5/6/2023	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special			
12 OFFICE	OFFICE HELD (if any) 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>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
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COMMITTEE TYPE  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE NAME  COMMITTEE ADDRESS  COMMITTEE CAMPAIGN TREASURER NAME  COMMITTEE CAMPAIGN TREASURER ADDRESS
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☐ Additional Pages

<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. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 13925.00</b>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	<b>\$ 773.06</b>
	4. TOTAL POLITICAL EXPENDITURES	<b>\$ 40364.96</b>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 76617.90</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 5th day of May, 2023, to certify which, witness my hand and seal of office.

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

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

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

# SUBTOTALS - COH

## FORM C/OH COVER SHEET PG 3

<b>19</b> FILER NAME <b>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>\$ 13925.00</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>\$ 40064.96</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>\$ 300.00</b>
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	<b>\$ 0</b>
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	<b>\$ 0</b>
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	<b>\$ 0</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**3/29/2023**

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

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

6 Contributor address; City; State; Zip Code  
**3807 E Songbird  
San Antonio, TX 78229**

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

9 Employer (See instructions)  
**none**

Date  
**3/31/2023**

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

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

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

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

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

Date  
**4/1/2023**

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

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

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

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

Employer (See instructions)  
**self**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**8734 Oak Meadow Dr  
Monte Alto, TX 78538**

Principal occupation / Job title (See instructions)  
**regional manager**

Employer (See instructions)  
**Primary Residential Mortgage**

**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 12**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/3/2023**

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

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

6 Contributor address; City; State; Zip Code  
**3625 Paesanos Pkwy  
San Antonio, TX 78231**

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

9 Employer (See instructions)  
**GSABA**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**17918 Texas Emmy Lane  
San Antonio, TX 78258**

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

Employer (See instructions)  
**Moore Law**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**11211 Raw Sienna  
Helotes, TX 78023**

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

Employer (See instructions)  
**self**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**54 Sendero Verde  
San Antonio, TX 78262**

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

Employer (See instructions)  
**Sitterle Homes**

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

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>3 of 12</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/3/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kendall Schrader</b> ..... 6 Contributor address; City; State; Zip Code <b>609 Contadora</b> <b>San Antonio, TX 78258</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>real estate</b>		9 Employer (See instructions) <b>self</b>
Date <b>4/3/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Luke Grothues</b> ..... Contributor address; City; State; Zip Code <b>26948 Lavender</b> <b>Boerne, TX 78015</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>real estate</b>		Employer (See instructions) <b>self</b>
Date <b>4/3/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Alysia Battistoni</b> ..... Contributor address; City; State; Zip Code <b>2020 Stone Creek Dr</b> <b>San Antonio, TX 78163</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>real estate</b>		Employer (See instructions) <b>self</b>
Date <b>4/3/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Paul Powell</b> ..... Contributor address; City; State; Zip Code <b>127 Evans Ave</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>real estate</b>		Employer (See instructions) <b>self</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:  
**4 of 12**

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

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

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

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

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

**6** Contributor address; City; State; Zip Code  
**26227 High Timber Pass St**  
**San Antonio, TX 78260**

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

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

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**819 County Rd**  
**San Antonio, TX 78101**

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

Employer (See instructions)  
**self**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**2510 Hollow Village Dr**  
**San Antonio, TX 78231**

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

Employer (See instructions)  
**self**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**3625 Paesano Pkwy**  
**San Antonio, TX 78231**

Principal occupation / Job title (See instructions)  
**none**

Employer (See instructions)  
**real estate PAC**

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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 12**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/3/2023**

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

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

6 Contributor address; City; State; Zip Code  
**PO Box 2246  
Austin, TX 78768**

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

9 Employer (See instructions)  
**PAC**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**23119 W IH 10 #902  
San Antonio, TX 78257**

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

Employer (See instructions)  
**self**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**2711 Trinity Fls  
San Antonio, TX 78261**

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

Employer (See instructions)  
**Sitterle Homes**

Date  
**4/3/2023**

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

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

Contributor address; City; State; Zip Code  
**1429 Cadillac Dr  
San Antonio, TX 78248**

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

Employer (See instructions)  
**Texas Homes**

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

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



# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>6 of 12</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/3/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Raul Jimenez</b> ..... 6 Contributor address; City; State; Zip Code <b>19413 Summer Hvn San Antonio, TX 78259</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>realtor</b>		9 Employer (See instructions) <b>Schrader Group</b>
Date <b>4/3/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Angela Rosas</b> ..... Contributor address; City; State; Zip Code <b>1310 W Oak Estates Dr San Antonio, TX 78260</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>business owner</b>		Employer (See instructions) <b>self</b>
Date <b>4/3/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Rodriguez</b> ..... Contributor address; City; State; Zip Code <b>818 Park Pt. San Antonio, TX 78253</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Land Manager</b>		Employer (See instructions) <b>Toll Brothers</b>
Date <b>4/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Greg &amp; Bekki Kowalski</b> ..... Contributor address; City; State; Zip Code <b>PO Box 1361 San Antonio, TX 78295</b>	Amount of contribution (\$) <b>1000.00</b>
Principal occupation / Job title (See instructions) <b>Business owner</b>		Employer (See instructions) <b>RK Group</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>7 of 12</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/7/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>San Antonio Hotel &amp; Lodging</b> ..... 6 Contributor address; City; State; Zip Code <b>119 Heiman #300</b> <b>San Antonio, TX 78205</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>PAC</b>		9 Employer (See instructions) <b>PAC</b>
Date <b>4/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Bitter Blue LLC</b> ..... Contributor address; City; State; Zip Code <b>706 Guadalupe St</b> <b>Austin, TX 78701</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>n/a</b>		Employer (See instructions) <b>Bitter Blue</b>
Date <b>4/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Fermin Rajunov</b> ..... Contributor address; City; State; Zip Code <b>5 Wayward Oaks</b> <b>San Antonio, TX 78248</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>business owner</b>		Employer (See instructions) <b>self</b>
Date <b>4/7/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Freddie Bustillo</b> ..... Contributor address; City; State; Zip Code <b>20307 Falling Harbor Lane</b> <b>Spring, TX 77379</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Client relations</b>		Employer (See instructions) <b>Foster Group</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>8 of 12</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/10/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Christopher Corso</b> ..... 6 Contributor address; City; State; Zip Code <b>2307 Camelback Dr</b> <b>San Antonio, TX 78209</b>	7 Amount of contribution (\$) <b>500.00</b>
8 Principal occupation / Job title (See instructions) <b>General contractor</b>		9 Employer (See instructions) <b>Joeris</b>
Date <b>4/12/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cynthia Schneider</b> ..... Contributor address; City; State; Zip Code <b>90 Turnberry Way</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>200.00</b>
Principal occupation / Job title (See instructions) <b>business owner</b>		Employer (See instructions) <b>self</b>
Date <b>4/13/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Inga Cotton</b> ..... Contributor address; City; State; Zip Code <b>537 Abiso Ave</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>25.00</b>
Principal occupation / Job title (See instructions) <b>Executive Director</b>		Employer (See instructions) <b>SA Charter Moms</b>
Date <b>4/14/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Miguel Martinez</b> ..... Contributor address; City; State; Zip Code <b>7615 N Songbird</b> <b>San Antonio, TX 78229</b>	Amount of contribution (\$) <b>75.00</b>
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions) <b>USPS</b>

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

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>9 of 12</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/17/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Weslee Baerga</b> ..... 6 Contributor address; City; State; Zip Code <b>3463 Magic Dr</b> <b>San Antonio, TX 78229</b>	7 Amount of contribution (\$) <b>250.00</b>
8 Principal occupation / Job title (See instructions) <b>owner</b>		9 Employer (See instructions) <b>Vuepoint agency</b>
Date <b>4/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Marion DeWall</b> ..... Contributor address; City; State; Zip Code <b>6720 Ghia Lane</b> <b>San Antonio, TX 78257</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>advertising</b>		Employer (See instructions) <b>PM Group</b>
Date <b>4/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Stephanie Jones</b> ..... Contributor address; City; State; Zip Code <b>000 000</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>50.00</b>
Principal occupation / Job title (See instructions) <b>retired</b>		Employer (See instructions) <b>USAA</b>
Date <b>4/18/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Randy Harig</b> ..... Contributor address; City; State; Zip Code <b>108 Geneseo</b> <b>San Antonio, TX 78209</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>CEO</b>		Employer (See instructions) <b>Texas Research &amp; Technology</b>
<p align="center"><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>10 of 12</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/19/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Davis</b> ..... 6 Contributor address; City; State; Zip Code <b>2110 Domal Lane</b> <b>San Antonio, TX 78230</b>	7 Amount of contribution (\$) <b>25.00</b>
8 Principal occupation / Job title (See instructions) <b>I.T. Manager</b>		9 Employer (See instructions) <b>Rackspace</b>
Date <b>4/20/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robert Braubach</b> ..... Contributor address; City; State; Zip Code <b>106 S St Marys #200</b> <b>San Antonio, TX 78205</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Braubach Law</b>
Date <b>4/21/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Edward Aguilar</b> ..... Contributor address; City; State; Zip Code <b>18 Oak Hill Pl</b> <b>San Antonio, TX 78229</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See instructions) <b>Insurance agent</b>		Employer (See instructions) <b>Assurance Plus Inc</b>
Date <b>4/24/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Filemon Vela</b> ..... Contributor address; City; State; Zip Code <b>2905 N Street NW</b> <b>Washington, DC 20007</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Akin</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:  
**11 of 12**

2 FILER NAME  
**Manny Pelaez**

3 Filer ID (Ethics Commission Filers)

4 Date  
**4/25/2023**

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
**Jose Luis Suarez**

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

6 Contributor address; City; State; Zip Code  
**7010 Bella Mist  
San Antonio, TX 78256**

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

9 Employer (See instructions)  
**self**

Date  
**4/26/2023**

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

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

Contributor address; City; State; Zip Code  
**PO Box 28490  
San Antonio, TX 78228**

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

Employer (See instructions)  
**self**

Date  
**4/26/2023**

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

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

Contributor address; City; State; Zip Code  
**1405 Spyglass Dr  
Austin, TX 78746**

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

Employer (See instructions)  
**self**

Date  
**4/26/2023**

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

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

Contributor address; City; State; Zip Code  
**1715 Cool Breeze  
San Antonio, TX 78245**

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

Employer (See instructions)  
**Uprise Real Estate Partners**

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

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

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>12 of 12</b>
2 FILER NAME <b>Manny Pelaez</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>4/26/2023</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Simran Gill Tirado</b> ..... 6 Contributor address; City; State; Zip Code <b>25607 Texas Ash</b> <b>San Antonio, TX 78261</b>	7 Amount of contribution (\$) <b>100.00</b>
8 Principal occupation / Job title (See instructions) <b>Financial Professional</b>		9 Employer (See instructions) <b>New York Life Insurance</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ivalis Gonzalez</b> ..... Contributor address; City; State; Zip Code <b>12402 King Walnut</b> <b>San Antonio, TX 78230</b>	Amount of contribution (\$) <b>250.00</b>
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Andrade, Van de Putte &amp; Associates</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jane Macon</b> ..... Contributor address; City; State; Zip Code <b>300 Convent St</b> <b>San Antonio, TX 78205</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>Bracewell</b>
Date <b>4/26/2023</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>R. Laurence Macon</b> ..... Contributor address; City; State; Zip Code <b>PO Box 120250</b> <b>San Antonio, TX 78212</b>	Amount of contribution (\$) <b>500.00</b>
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>Macon Law</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>		

## 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 7</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>3/28/2023</b>	<b>5</b> Payee name <b>Micheles</b>	
<b>6</b> Amount (\$) <b>615.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1201 K street NW Washington, DC 20005</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>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 <b>3/29/2023</b>	Payee name <b>Rumis Kitchen</b>	
Amount (\$) <b>202.40</b>	Payee address; City; State; Zip Code <b>640 640 L Street Washington, DC 20002</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>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		

  

Date <b>3/30/2023</b>	Payee name <b>Le Diplomat</b>	
Amount (\$) <b>363.50</b>	Payee address; City; State; Zip Code <b>1601 14th St NW Washington, DC 20009</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Food/Beverage Expense</b>	Description <b>meeting event</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH      Candidate / Officeholder name      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>2 of 7</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/1/2023</b>	<b>5</b> Payee name <b>Woods of Shavano Community Assoc.</b>		
<b>6</b> Amount (\$) <b>1000.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>13138 Parksite Woods St San Antonio, TX 78230</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>donation</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>4/1/2023</b>	Payee name <b>Rikko Ollerivedez</b>		
Amount (\$) <b>650.00</b>	Payee address; City; State; Zip Code <b>PO Box 690232 San Antonio, TX 78269</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>		Description <b>DJ 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>4/4/2023</b>	Payee name <b>San Antonio Safe PAC</b>		
Amount (\$) <b>1000.00</b>	Payee address; City; State; Zip Code <b>000 000 San Antonio, TX 00000</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>SA Safe Pac</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>3 of 7</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/7/2023</b>	<b>5</b> Payee name <b>Constant Contact</b>		
<b>6</b> Amount (\$) <b>133.25</b>	<b>7</b> Payee address; City; State; Zip Code <b>3675 Precision Dri 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>4/10/2023</b>	Payee name <b>UTSA Annual Giving</b>		
Amount (\$) <b>5000.00</b>	Payee address; City; State; Zip Code <b>1 UTSA Circle 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>scholarships</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>4/10/2023</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			
<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>4 of 7</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/16/2023</b>	<b>5</b> Payee name <b>Clear Channel</b>	
<b>6</b> Amount (\$) <b>5175.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>4830 NW Loop 1604 San Antonio, TX 78231</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	<b>(b)</b> Description <b>bill board</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>4/16/2023</b>	Candidate / Officeholder name <b>SA Express News</b>	
Amount (\$) <b>8597.50</b>	Payee address; City; State; Zip Code <b>420 Broadway #200 San Antonio, TX 78205</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>	Description <b>AD</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>4/18/2023</b>	Candidate / Officeholder name <b>Viva Strategy Group</b>	
Amount (\$) <b>1050.00</b>	Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd San Antonio, TX 78201</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>campaign</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>5 of 7</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/18/2023</b>	<b>5</b> Payee name <b>Viva Strategy Group</b>		
<b>6</b> Amount (\$) <b>1350.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>1850 Fredericksburg Rd San Antonio, TX 78201</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Consulting Expense</b>		<b>(b)</b> Description <b>campaign</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>4/19/2023</b>	Payee name <b>Alamo Mailing</b>		
Amount (\$) <b>3923.99</b>	Payee address; City; State; Zip Code <b>13114 Look Out Run San Antonio, TX 78233</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>mailer</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>4/20/2023</b>	Payee name <b>Sign Busters LLC</b>		
Amount (\$) <b>3495.00</b>	Payee address; City; State; Zip Code <b>PO Box 241018 San Antonio, TX 78224</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>signs</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>6 of 7</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/20/2023</b>	<b>5</b> Payee name <b>JG Media</b>		
<b>6</b> Amount (\$) <b>300.00</b>	<b>7</b> Payee address; City; State; Zip Code <b>3600 E Palm Valley Rd Round Rock , TX 78665</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		<b>(b)</b> Description <b>digital banners</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>4/20/2023</b>	Payee name <b>JG Media</b>		
Amount (\$) <b>1200.00</b>	Payee address; City; State; Zip Code <b>3600 E Palm Valley Rd Round Rock , TX 78665</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Advertising Expense</b>		Description <b>Ads and banners</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date <b>4/24/2023</b>	Payee name <b>Alamo Postage</b>		
Amount (\$) <b>3928.12</b>	Payee address; City; State; Zip Code <b>13114 Lookout Run San Antonio, TX 78233</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		Description <b>mailer postage</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>7 of 7</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/25/2023</b>	<b>5</b> Payee name <b>JVC Media LLC</b>		
<b>6</b> Amount (\$) <b>242.48</b>	<b>7</b> Payee address; City; State; Zip Code <b>3106 Fall Cresta Drive San Antonio, TX 78247</b>		
<b>8</b>  <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Printing Expense</b>		<b>(b)</b> Description <b>signs</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>4/26/2023</b>	Payee name <b>Maria Bonita Mexican Restaurant</b>		
Amount (\$) <b>737.87</b>	Payee address; City; State; Zip Code <b>350 Northaven San Antonio, TX 78229</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Event Expense</b>		Description <b>fundraiser 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>4/26/2023</b>	Payee name <b>REI</b>		
Amount (\$) <b>129.79</b>	Payee address; City; State; Zip Code <b>1745 IH 10 San Antonio, TX 78230</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: chairs, equip</b>		Description <b>poll site equipment</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**

# 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)
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<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
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Date	Payee name
------	------------

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

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

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F3**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule F3:  
**1 of 1**

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

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

**4** Date

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

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

**7** Description of investment

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

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

**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
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Date	Payee name
------	------------

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

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

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  
Advertising Expense  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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

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

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule G: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Manny Pelaez</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>4/16/2023</b>	<b>5</b> Payee Name <b>Amazon</b>	
<b>6</b> Amount (\$) <b>300.00</b> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code <b>410 Terry Av Seattle, WA 98109</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>gift cards for volunteers</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

5 Name of person from whom amount is received

8 Amount (\$)

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

7 Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

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

**SCHEDULE T**

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

# CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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

C/OH NAME  
**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