### CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

#### FORM COR-C/OH

1	1 Filer ID (Ethics Commission Filers)			<ul><li>2 Total pages filed:</li><li>5</li></ul>		OFFICE USE ONLY	
3	CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <b>Manny</b>		MI	Date Received	
		NICKNAME	LAST		SUFFIX		
			Pelaez				
						4	
4	ORIGINAL REPORT						
	ITFC						
		July 15: Semi-A	nnual			Date Hand-delivered	or Date Postmarked
						Receipt #	Amount \$
5	ORIGINAL PERIOD	•	Year	Month	•	Date Processed	
	COVERED	4/2/2024	ını	ROUGH	6/30/2024	Date Imaged	
6	EXPLANATION OF CO	DRRECTION					
	Clerical Error. Cont			_	n Walter Serna, wh	en the actual	
	contribution was from	om Linebarger Go	oggan Blair & Sa	ımpson, LLP			
7	AFFIDAVIT						
•	I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.						
	Check ONLY if applicable:						
	Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.						
	Other reports: I swear, or affirm, that I am report not later than the 14th business day afte					n filing this correcte	d
						er the date I learned	I that
the report as originally filed is inaccurate or inco affirm, that any error or omission in the report as						•	
				n good faith.	ssion in the report a	as originally liled wa	15
* * * Electronica						cally Certified * * *	
				5	Signature of Candidate	e or Officeholder	
A	FFIX NOTARY STAM	P / SEAL ABOVE					
	worn to and subscribe certify which, witness			Pelaez	this the <u>16th</u>	day of <u>August</u>	, 20 <b><u>24</u> ,</b>
_	Signature of officer adm	inistering oath	Printed n	ame of officer administeri	ng oath	Title of officer admir	nistering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Revised 04/27/2015

# **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:						
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST MI Manny		OFFICE USE ONLY			
NAME	NICKNAME LAST Pelaez		 SUFFIX	Date Received 8/19/2024 7:02:0	0AM	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 3522 Paesano Pkwy #301 San Antonio TX 78231					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBE	ER EXTEN	SION	Date Hand-delivered	or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST April	n	ИІ	Receipt #	Amount \$	
NAME	NICKNAME LAST  Ancira		SUFFIX	Date Processed <b>8/19/2024 7:02:00</b> Date Imaged	)AM	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)  8 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  31305 Keeneland Drive Boerne TX 78015  AREA CODE PHONE NUMBER EXTENSION  ( ) -					
9 REPORT TYPE	July 15: Semi-Annual					
10 PERIOD COVERED	Month Day <b>4/2/2024</b>	Year	Month H <b>6/3</b>	Day Year 80/2024		
11 ELECTION	ELECTION DATE  Month Day Year  5/3/2025	Primary Runoff    Runoff   Specia	Description			
12 OFFICE	OFFICE HELD (if any)  City Councilman District 8		13 OFFICE SOUGHT Mayor	(if known)		
GO TO PAGE 2						

## **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT**

#### FORM C/OH COVER SHEET PG 2

14 C/OH NAME Manny Pelaez				15 Filer II	) (Ethics Commission Filers)
16 NOTICE FROM POLITICAL COMMITTEE(S)	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.				
	COMMITTEE TYPE   COMMITTEE NAME				
	GENERAL COMMITTEE ADDRESS				
	SPECIFIC	SPECIFIC			
Additional Pages		COMMITTEE CAMPA	IGN TREASURER NAME		
Additional Fages		COMMITTEE CAMPA	IIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS  TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)  \$ 0			0		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$	29560.00	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.		\$	0	
	4. TOTAL POLITICAL EXPENDITURES		\$	38924.66	
CONTRIBUTION BALANCE  5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD			\$	8963.24	
OUTSTANDING LOAN TOTALS	٥.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0
18 AFFIDAVIT				•	
			I swear, or affirm, under penalty of is true and correct and includes all me under Title 15, Election Code.		
* * * Electronically Certified * * *					
AFFIX NOTARY STAM	Signature of Candidate or Officeholder AFFIX NOTARY STAMP / SEAL ABOVE				
Sworn to and subscribe of <b>August</b> ,		-		this t	the <u>16th</u> day
Signature of officer adn	ninistering oath	Printed name of	officer administering oath	Title	of officer administering oath

### **SUBTOTALS - COH**

### FORM C/OH COVER SHEET PG 3

		20 Filer ID (Ethics Commission Filers)	
-	SUBTOTAL AMOUNT		
X	\$ 29326.50		
	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 233.50
	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$0
	SCHEDULE E: LOANS		\$0
	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 37094.05
	\$0		
	\$0		
	\$0		
	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 1830.61
	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	C/OH	\$0
	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	IS	\$0
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$0
	Manny F	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  SCHEDULE B: PLEDGED CONTRIBUTIONS  SCHEDULE E: LOANS  SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS  SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF  SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS	SCHEDULE SUBTOTALS NAME OF SCHEDULE  X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS  SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS  SCHEDULE B: PLEDGED CONTRIBUTIONS  SCHEDULE E: LOANS  SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F2: UNPAID INCURRED OBLIGATIONS  SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD  SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS  SCHEDULE G: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH  SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS  SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS

#### **MONETARY POLITICAL CONTRIBUTIONS**

#### SCHEDULE A1

	Т	he Instruction Guide explains how to complete this	1 Total pages Schedule A1: 1 of 1				
2	FILER NAME  Manny Pelaez			3 Filer ID (Ethics Commission Filers)			
4	Date <b>6/13/2024</b>	5 Full name of contributor	AC (ID#)	7 Amount of contribution (\$) 1000.00			
		6 Contributor address; City; S PO Box 17428 Austin, TX 78760	State; Zip Code				
8	Principal occupa	occupation / Job title (See instructions)  9 Employer (See instructions)					
	Date	Full name of contributor	AC (ID#)	Amount of contribution (\$)			
		Contributor address; City; S					
	Principal occupa	tion / Job title (See instructions)	Employer (See instru	Employer (See instructions)			
	Date	Full name of contributor	AC (ID#)	Amount of contribution (\$)			
		Contributor address; City; S					
Principal occupation / Job title (See instructions)  Employer (See instructions)							
	Date	Full name of contributor	AC (ID#) Amount of contribution (\$)				
		Contributor address; City; S					
	Principal occupa	tion / Job title (See instructions)	Employer (See instructions)				
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						

Forms provided by Texas Ethics Commission