

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: 50	
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 12402 Abbey Park San Antonio TX 78249			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 3115 Pinto Pass San Antonio TX 78247-				
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 857-8747	EXTENSION		
9 REPORT TYPE	8th Day Before General Election				
10 PERIOD COVERED	Month Day Year 3/23/2021		THROUGH	Month Day Year 4/21/2021	
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year 5/1/2021	<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		

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Manuel Pelaez	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S)	<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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<input type="checkbox"/> 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

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 29759.99
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 194.82
	4. TOTAL POLITICAL EXPENDITURES	\$ 27124.88
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 0
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 AFFIDAVIT

I swear, or affirm, under penalty of 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 Manuel Pelaez, this the 29th day of April, 2021, 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

19 FILER NAME Manuel Pelaez		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 29759.99
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 27124.88
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 463.39

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/23/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Calvin Finch

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**6926 Dorothy Louis Dr.
San Antonio, TX 78229**

8 Principal occupation / Job title (See instructions)
retired

9 Employer (See instructions)
retired

Date
3/23/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Leah Jacobson

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**124 E Edgewood PL
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
self

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jared Fleisher

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**1150 Griswold St #2802
Detroit, MI 48226**

Principal occupation / Job title (See instructions)
Gov. Affairs

Employer (See instructions)
Rock Central

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
John Archer

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**134 W. Mistletoe
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
consultant

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:
2 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/24/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
April Ancira

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**31305 Keeneland Dr
Boerne, TX 78015**

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

9 Employer (See instructions)
Self

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Soraya Hanshew

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**632 Moondale Dr
El Paso, TX 79912**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Javier Espinoza

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Andrew Woellner

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1375 Ella Pl
Houston, TX 77008**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Potts Law Firm

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/24/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Amy Hardberger

7 Amount of contribution (\$)
125.00

6 Contributor address; City; State; Zip Code
**316 Mary Louise Dr
San Antonio, TX 78201**

8 Principal occupation / Job title (See instructions)
Professor

9 Employer (See instructions)
Tx Tech School of Law

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Charles Gonzalez

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**206 E Locust
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Ogletree Deakins PC

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Davidson Troilo Ream & Garza

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**601 NW Loop 410
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Law firm

Employer (See instructions)
Self

Date
3/24/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rick Cavender

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Auto Business

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:
4 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/24/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jay Hulings

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**15523 Clover Rdg
San Antonio, TX 78248**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Davis, Santos PC

Date
3/25/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jason Morrow

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**28215 Heritage Trail
Boerne, TX 78015**

Principal occupation / Job title (See instructions)
Doctor

Employer (See instructions)
Self

Date
3/25/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Christina Burden

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**28215 Heritage Trail
Boerne, TX 78015**

Principal occupation / Job title (See instructions)
Psychologist

Employer (See instructions)
self

Date
3/25/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Phil Hardberger

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**319 W Hollywood
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Philanthropist

Employer (See instructions)
Self

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
5 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/26/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
EJ Parra

7 Amount of contribution (\$)
250.00

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

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

9 Employer (See instructions)
Parra Company

Date
3/26/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Anne Marie Grubet

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2136 W Smt
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
COO

Employer (See instructions)
NW Mutual

Date
3/27/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Charlie Moke

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**8343 Setting Moon
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)
Business Dev Manager

Employer (See instructions)
UTSA

Date
3/29/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sardar Biglari

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**000 No address
San Antonio, TX 78000**

Principal occupation / Job title (See instructions)
Chairman

Employer (See instructions)
Biglari Holdings

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/29/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Shad Schmid

7 Amount of contribution (\$)
75.00

6 Contributor address; City; State; Zip Code
**318 Waxberry Trl
San Antonio, TX 78256**

8 Principal occupation / Job title (See instructions)
VP

9 Employer (See instructions)
Greater SA Builders Assoc

Date
3/29/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mary Hare Worth

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Business owner

Employer (See instructions)
Self

Date
3/29/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sam Rodriguez

Amount of contribution (\$)
100.00

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

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
n/a

Date
3/29/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ms. Enrique Davila

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**215 N. Center #1808
San Antonio, TX 78202**

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

Employer (See instructions)
n/a

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/29/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Deborah Jean Serna

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**20403 Terrabianca
San Antonio, TX 78258**

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

9 Employer (See instructions)
n/a

Date
3/29/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Enrique Davila

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**215 N Center St #1808
San Antonio, TX 78202**

Principal occupation / Job title (See instructions)
business owner

Employer (See instructions)
self

Date
3/30/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
John Gatens

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**8000 Donore Pl #51
San Antonio, TX 78229**

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

Employer (See instructions)
n/a

Date
3/30/2021

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**8000 Donore #5000
San Antonio, TX 78229**

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

Employer (See instructions)
n/a

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: 8 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kathleen Weir Vale 6 Contributor address; City; State; Zip Code 102 E Hollywood Ave San Antonio, TX 78212	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) retired		9 Employer (See instructions) n/a
Date 3/31/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shelley Baillargeon Contributor address; City; State; Zip Code 23 Inverness Blvd San Antonio, TX 78230	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Psychotherapist		Employer (See instructions) self
Date 4/1/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Paul Basaldua Contributor address; City; State; Zip Code 3 Woltwood San Antonio, TX 78248	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Real Estate Developer		Employer (See instructions) Mosaic
Date 4/1/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Josh Kahane Contributor address; City; State; Zip Code 5669 Vantage Pt Memphis, TX 38120	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Glankler Brown

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: 9 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mark Rodriguez 6 Contributor address; City; State; Zip Code 1122 Colorado #2399 Austin, TX 78701	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) lobbyist		9 Employer (See instructions) self
Date 4/1/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chris Rosas Contributor address; City; State; Zip Code 6283 Lockhill San Antonio, TX 78240	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Accountant		Employer (See instructions) Bumble
Date 4/1/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ken Brown Contributor address; City; State; Zip Code 2454 Toftrees San Antonio, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Brown & Ortiz
Date 4/1/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Daniel Ortiz Contributor address; City; State; Zip Code 9103 Mellbrook St San Antonio, TX 78230	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Brown & Ortiz
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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: 10 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Hogan 6 Contributor address; City; State; Zip Code 1535 Yosemite Oaks San Antonio, TX 78213	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Developer		9 Employer (See instructions) self
Date 4/3/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marjorie Lucey Contributor address; City; State; Zip Code 12835 Castle Bend San Antonio, TX 78230	Amount of contribution (\$) 20.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) n/a
Date 4/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Julissa Carielo Contributor address; City; State; Zip Code 211 Honeysuckle San Antonio, TX 78213	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Builder		Employer (See instructions) Tejas Premier Building Contractor
Date 4/5/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Chuck Saxer Contributor address; City; State; Zip Code 000 no address San Antonio, TX 00000	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) n/a
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/6/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Fermin Rajunov

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
5 Wayward Oaks
San Antonio, TX 78248

8 Principal occupation / Job title (See instructions)
Financial markets

9 Employer (See instructions)
self

Date
4/6/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dorothy Rajunov

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
5 Wayward Oaks
San Antonio, TX 78248

Principal occupation / Job title (See instructions)
Administrator

Employer (See instructions)
Credito Real USA

Date
4/6/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tyler Chalfin

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
312 Pearl Pkwy
San Antonio, TX 78215

Principal occupation / Job title (See instructions)
Creator

Employer (See instructions)
Self

Date
4/6/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Emily Kobernick

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
2690 Blue Wind Rd #200
San Antonio, TX 78221

Principal occupation / Job title (See instructions)
Exec Assistant

Employer (See instructions)
Strategic Campaign Sourcing

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 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/6/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calvin Samson 6 Contributor address; City; State; Zip Code 831 Woodlawn Ave San Antonio, TX 78212	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Law Clerk		9 Employer (See instructions) Fletcher Strategies
Date 4/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lyndsay Thorn Contributor address; City; State; Zip Code 105 Montclair Ave Alamo Heights, TX 78209	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Architect		Employer (See instructions) AIA Riba Architect
Date 4/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wendy Thorn Contributor address; City; State; Zip Code 312 Pearl Pkwy #4406 San Antonio, TX 78215	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Architect		Employer (See instructions) AIA Riba
Date 4/6/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mallory Samson Contributor address; City; State; Zip Code 603 Maiden Lane Glen Ellyn, IL 60137	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) CFO		Employer (See instructions) Self
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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: 13 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/6/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Samson 6 Contributor address; City; State; Zip Code 603 Maiden Lane Glen Ellyn, IL 60317	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Recruiter		9 Employer (See instructions) self
Date 4/7/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dr. Esteban Lopez Contributor address; City; State; Zip Code 6817 West Ave San Antonio, TX 78213	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Market Lead Americas		Employer (See instructions) Google Cloud
Date 4/9/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaime Kowalski Contributor address; City; State; Zip Code 21218 Harvest Hills San Antonio, TX 78258	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Marketing		Employer (See instructions) The RK Group
Date 4/9/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wyatt Wright Contributor address; City; State; Zip Code 5707 W IH 10 San Antonio, TX 78201	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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: 14 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harold McCall 6 Contributor address; City; State; Zip Code 5705 I10 West San Antonio, TX 78201	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Self
Date 4/9/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wayne Wright Contributor address; City; State; Zip Code 5707 W IH10 San Antonio, TX 78201	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) self
Date 4/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Angers Contributor address; City; State; Zip Code 5750 E Calle Aurora Tucson, TX 85711	Amount of contribution (\$) 5.00
Principal occupation / Job title (See instructions) Chef		Employer (See instructions) Self
Date 4/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andrew Denoncour Contributor address; City; State; Zip Code 4422 Black Hickory Woods San Antonio, TX 78249	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Dir of Product Management		Employer (See instructions) Firstmark Credit Union
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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: 15 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth Swize 6 Contributor address; City; State; Zip Code 3019 Elm Creek Pl San Antonio, TX 78230	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) n/a		9 Employer (See instructions) n/a
Date 4/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Angers Contributor address; City; State; Zip Code 5750 E Calle Aurora Tucson, AZ 85711	Amount of contribution (\$) 5.00
Principal occupation / Job title (See instructions) Chef		Employer (See instructions) Self
Date 4/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Angers Contributor address; City; State; Zip Code 5750 E Calle Aurora Tucson, AZ 85711	Amount of contribution (\$) 5.00
Principal occupation / Job title (See instructions) Chef		Employer (See instructions) Self
Date 4/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stephen Cavender Contributor address; City; State; Zip Code PO Box 681237 San Antonio, TX 78268	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) auto business		Employer (See instructions) self
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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:
16 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/12/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mrs. Stephen Cavender

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
PO Box 681237
San Antonio, TX 78268

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

9 Employer (See instructions)
n/a

Date
4/12/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Raul Aguilar

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
946 Mansfield
San Antonio, TX 78251

Principal occupation / Job title (See instructions)
self

Employer (See instructions)
RA Builders

Date
4/12/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Eyal Avnon

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
216 Sequia Dr
Hollywood Park, TX 78232

Principal occupation / Job title (See instructions)
Business owner

Employer (See instructions)
self

Date
4/13/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gina Eisenberg

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
16 Garden Sq
San Antonio, TX 78209

Principal occupation / Job title (See instructions)
PR Consultant

Employer (See instructions)
The Eisenberg Group

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: 17 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/13/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melissa Killen 6 Contributor address; City; State; Zip Code 29 Winthrop Downs San Antonio, TX 78257	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) business owner		9 Employer (See instructions) self
Date 4/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rob Killen Contributor address; City; State; Zip Code 29 Winthrop Downs San Antonio, TX 78257	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) self
Date 4/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Parkerson Contributor address; City; State; Zip Code 108 River Oaks Wimberley, TX 78678	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) business owner		Employer (See instructions) self
Date 4/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard Cavender Contributor address; City; State; Zip Code 21105 I 10 West San Antonio, TX 78257	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Auto Dealer		Employer (See instructions) Self
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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:
18 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/13/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
James Griffen

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**606 E Mandalay
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Brown & Ortiz

Date
4/14/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ashley Farrimond

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**11903 Sandbar HI
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self

Date
4/14/2021

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kenneth Gindy

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**000 no address
San Antonio, TX 00000**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Alamo Aircraft

Date
4/16/2021

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)
n/a

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: 19 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ross Properties LLC 6 Contributor address; City; State; Zip Code PO Box 28490 San Antonio, TX 78228	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Business owner		9 Employer (See instructions) Self
Date 4/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tim Maloney Contributor address; City; State; Zip Code 926 S. Alamo San Antonio, TX 78205	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Maloney & Campolo
Date 4/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Spencer Zack Contributor address; City; State; Zip Code 312 Pearl Pkwy #4303 San Antonio, TX 78215	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) business owner		Employer (See instructions) self
Date 4/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Susan Yantis Contributor address; City; State; Zip Code 14 DeZavala PI San Antonio, TX 78231	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Housewife		Employer (See instructions) n/a
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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: 20 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tom Yantis 6 Contributor address; City; State; Zip Code 14 DeZavala Pl San Antonio, TX 78231	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Business owner		9 Employer (See instructions) self
Date 4/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Pritchard Contributor address; City; State; Zip Code 10101 Reunion Place #600 San Antonio, TX 78216	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self
Date 4/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mrs. David Pritchard Contributor address; City; State; Zip Code 10101 Reunion Pl #600 San Antonio, TX 78216	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) n/a		Employer (See instructions) n/a
Date 4/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tamara Benavides Contributor address; City; State; Zip Code 000 no address San Antonio, TX 00000	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) n/a		Employer (See instructions) n/a
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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: 21 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/20/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Val Garcia 6 Contributor address; City; State; Zip Code 1354 N Loop 1604E #103 San Antonio, TX 78232	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) President		9 Employer (See instructions) Trusted Driver
Date 4/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Strange Contributor address; City; State; Zip Code 125 Guadalupe St #A206 San Antonio, TX 78204	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) business owner		Employer (See instructions) self
Date 4/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charles Angers Contributor address; City; State; Zip Code 5750 E Calle Aurora Tucson, AZ 85711	Amount of contribution (\$) 5.00
Principal occupation / Job title (See instructions) Chef		Employer (See instructions) Self
Date 4/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Albert Carrizalez Contributor address; City; State; Zip Code 111 W. Huisache San Antonio, TX 78212	Amount of contribution (\$) 49.99
Principal occupation / Job title (See instructions) Gov. Affairs		Employer (See instructions) UTSA
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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: 22 of 23
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) George Mery 6 Contributor address; City; State; Zip Code 5157 Blanco Rd #E San Antonio, TX 78216	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Self
Date 4/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Juan Solis Contributor address; City; State; Zip Code 328 Town Vue Dr. San Antonio, TX 78213	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) Banker		Employer (See instructions) BB
Date 4/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cynthia Garza Contributor address; City; State; Zip Code 27 Braches Park San Antonio, TX 78240	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) N/A		Employer (See instructions) N/A
Date 4/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dan Naranjo Contributor address; City; State; Zip Code 4 Longsford San Antonio, TX 78209	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Mediator		Employer (See instructions) self
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</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:
23 of 23

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/21/2021

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Robert Greenblum

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**11221 Empire Lane
Rockville, MD 20852**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Amount of contribution (\$)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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 Manuel 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			

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements		

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Manuel 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

1 Total pages Schedule F1: 1 of 12	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2021	5 Payee name Alamo Mailing	
6 Amount (\$) 289.46	7 Payee address; City; State; Zip Code 13114 Lookout Run San Antonio, TX 78233	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description postage
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 3/24/2021	Payee name Prestige Printing	
Amount (\$) 1314.16	Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78250	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description mail
	<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 3/24/2021	Payee name Paesanos	
Amount (\$) 129.07	Payee address; City; State; Zip Code 3622 Paesano Pkwy San Antonio, TX 78231	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description fundraising
	<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

1 Total pages Schedule F1: 2 of 12	2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2021	5 Payee name Vista Print		
6 Amount (\$) 110.18	7 Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description Hats
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date 3/29/2021	Payee name Nationbuilder		
Amount (\$) 111.00	Payee address; City; State; Zip Code 520 South Grand Ave Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description website
	<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 3/30/2021	Payee name JVC Media		
Amount (\$) 993.19	Payee address; City; State; Zip Code 9335 Lamerton San Antonio, TX 78250		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description t-shirts, sign stakes
	<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

1 Total pages Schedule F1: 3 of 12	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 3/30/2021	5 Payee name JVC Media	
6 Amount (\$) 1277.35	7 Payee address; City; State; Zip Code 9335 Lamerton San Antonio, TX 78250	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description signs
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 3/31/2021	Payee name Facebook		
Amount (\$) 102.32	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description ads	
	<input checked="" 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 3/31/2021	Payee name Ginos Deli		
Amount (\$) 84.32	Payee address; City; State; Zip Code 13210 Huebner San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description volunteers	
	<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

1 Total pages Schedule F1: 4 of 12	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 3/31/2021	5 Payee name Viva Strategy Group	
6 Amount (\$) 2502.44	7 Payee address; City; State; Zip Code 1850 Fredericksburg San Antonio, TX 78231	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description fundraising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 3/31/2021	Payee name Amazon		
Amount (\$) 91.80	Payee address; City; State; Zip Code 410 Terry Ave Seattle, WA 98109		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description giveaways	
	<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 4/1/2021	Payee name Ajuua Mexican Grill		
Amount (\$) 102.88	Payee address; City; State; Zip Code 11703 Huebner #208 San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description team event	
	<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

1 Total pages Schedule F1: 5 of 12	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/2/2021	5 Payee name Constant Contact	
6 Amount (\$) 101.27	7 Payee address; City; State; Zip Code 3675 Precision Dr Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Email program
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 4/3/2021	Payee name Lowes		
Amount (\$) 119.05	Payee address; City; State; Zip Code 18303 Rim Drive San Antonio, TX 78257		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description sign maintenance	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input checked="" 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 4/5/2021	Payee name Home Depot		
Amount (\$) 91.87	Payee address; City; State; Zip Code 12871 I 10 San Antonio, TX 78249		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description supplies	
	<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

1 Total pages Schedule F1: 6 of 12	2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/5/2021	5 Payee name Prestige Printing		
6 Amount (\$) 1682.21	7 Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description Inv. 66315 & 66366
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/5/2021	Payee name Sergio Buentello		
Amount (\$) 440.00	Payee address; City; State; Zip Code 1827 Buentello San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description sign prep
	<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 4/6/2021	Payee name Paesanos		
Amount (\$) 186.48	Payee address; City; State; Zip Code 3622 Paesano Pkwy San Antonio, TX 78231		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense		Description event
	<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

1 Total pages Schedule F1: 7 of 12	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/7/2021	5 Payee name Vista Print	
6 Amount (\$) 122.72	7 Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description stickers
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought Office held

Date 4/9/2021	Payee name Vista Print		
Amount (\$) 59.61	Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description shirts	
	<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 4/9/2021	Payee name Vista Print		
Amount (\$) 67.58	Payee address; City; State; Zip Code 95 Hayden Ave Lexington, MA 02421		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description shirts	
	<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

1 Total pages Schedule F1: 8 of 12	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/10/2021	5 Payee name Woods of Shavano HOA	
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 13838 Parksite Wood San Antonio, TX 78249	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description HOA contribution
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 4/12/2021	Payee name Matin Tabbakh		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 23702 IH 10 West San Antonio, TX 78257		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Signs	
	<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 4/13/2021	Payee name Ginos Deli		
Amount (\$) 122.63	Payee address; City; State; Zip Code 13210 Huebner San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description volunteers	
	<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

1 Total pages Schedule F1: 9 of 12	2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/13/2021	5 Payee name Alamo Mailing		
6 Amount (\$) 3414.53	7 Payee address; City; State; Zip Code 13114 Lookout Run San Antonio, TX 78233		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description mail
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/14/2021	Payee name Viva Politics		
Amount (\$) 4000.00	Payee address; City; State; Zip Code 1850 Fredericksburg Rd San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense		Description campaign
	<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 4/16/2021	Payee name Clear Channel		
Amount (\$) 3500.00	Payee address; City; State; Zip Code PO Box 847247 Dallas, TX 75284		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense		Description billboard
	<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

1 Total pages Schedule F1: 10 of 12	2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/16/2021	5 Payee name Alamo Asian Chamber		
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 602 E Commerce San Antonio, TX 78205		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description event contribution
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/17/2021	Payee name Home Depot		
Amount (\$) 202.90	Payee address; City; State; Zip Code 12871 I 10 San Antonio, TX 78249		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description sign materials
	<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 4/18/2021	Payee name Lowes		
Amount (\$) 16.76	Payee address; City; State; Zip Code 7901 Callaghan Rd San Antonio, TX 78229		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees		Description sign materials
	<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

1 Total pages Schedule F1: 11 of 12	2 FILER NAME Manuel Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/18/2021	5 Payee name Ajuuas Mexican Grill		
6 Amount (\$) 85.49	7 Payee address; City; State; Zip Code 11793 Huebner San Antonio, TX 78230		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description staff, volunteers
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 4/19/2021	Payee name Alamo Mailing		
Amount (\$) 2349.69	Payee address; City; State; Zip Code 13114 Lookout Rd San Antonio, TX 78233		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description postage
	<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 4/19/2021	Payee name Prestige Printing		
Amount (\$) 1169.10	Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description mail
	<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

1 Total pages Schedule F1: 12 of 12	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/21/2021	5 Payee name Sergio Buentello	
6 Amount (\$) 440.00	7 Payee address; City; State; Zip Code 1827 Wood Grove San Antonio, TX 78232	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Sign prep
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 4/21/2021	Payee name Tilos Mexican Restaurant		
Amount (\$) 100.00	Payee address; City; State; Zip Code 12403 West Ave San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description event	
	<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		
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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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

1 Total pages Schedule F2: 1 of 1	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

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

11 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
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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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
Manuel 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 (\$)

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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

1 Total pages Schedule F4:
1 of 1

2 FILER NAME
Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD

\$ 0

5 Date

6 Payee name

7 Amount (\$)

8 Payee address; City; State; Zip Code

9 TYPE OF
EXPENDITURE

☐

Political

☐

Non-Political

10 PURPOSE
OF
EXPENDITURE

(a) Category (See categories listed at the top of this schedule)

(b) Description

☐

Check if travel outside of Texas, complete schedule T

☐

Check if Austin, TX, officeholder living expense

11 Complete ONLY 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

☐

Political

☐

Non-Political

PURPOSE
OF
EXPENDITURE

Category (See categories listed at the top of this schedule)

Description

☐

Check if travel outside of Texas, complete schedule T

☐

Check if Austin, TX, officeholder living expense

Complete ONLY if direct
expenditure to benefit C/OH

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule G: 1 of 1	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee Name	
6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	
	(b) Description	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 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		
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			

Date	Payee name		
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code		
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

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

1 Total pages Schedule H: 1 of 1	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Business address; City; State; Zip Code	
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		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Business address; City; State; Zip Code	
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		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Business address; City; State; Zip Code	
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		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Manuel Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Manuel Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
3/30/2021

5 Name of person from whom amount is received
Manny Pelaez

8 Amount (\$)
84.32

6 Address of person from whom amount is received; City; State; Zip Code
**3522 Paesano Pkwy
San Antonio, TX 78231**

7 Purpose for which amount is received ☐ Check if political contribution returned to filer
Refund - food expense for volunteers

Date
3/31/2021

Name of person from whom amount is received
Manny Pelaez

Amount (\$)
129.07

Address of person from whom amount is received; City; State; Zip Code
**3522 Paesano Pkwy
San Antonio, TX 78231**

Purpose for which amount is received ☐ Check if political contribution returned to filer
Expense reimbursement - food event

Date
4/13/2021

Name of person from whom amount is received
Manny Pelaez

Amount (\$)
250.00

Address of person from whom amount is received; City; State; Zip Code
**3522 Paesano Pkwy #301
San Antonio, TX 78231**

Purpose for which amount is received ☐ Check if political contribution returned to filer
**Reimbursement was made in error. Recipient
will reimburse the campaign and document for**

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 1 of 1
2 FILER NAME Manuel Pelaez		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; 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>		
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; 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)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

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
Manuel 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