

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>101</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Mario</b>	FIRST MI <b>Mario</b>	<b>OFFICE USE ONLY</b>
	NICKNAME <b>Bravo</b>	LAST SUFFIX <b>Bravo</b>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>1554 W. Mulberry Ave #1 San Antonio TX 78201</b>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE ( )	PHONE NUMBER -	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <b>Mr</b>	FIRST MI <b>Armando G</b>	Date Received
	NICKNAME <b>Bravo</b>	LAST SUFFIX <b>Bravo</b>	Date Hand-delivered or Date Postmarked
			Receipt #      Amount \$
		Date Processed	
		Date Imaged	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>1554 W. Mulberry San Antonio TX 78201</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE ( )	PHONE NUMBER -	
9 REPORT TYPE	<b>January 15: Semi-Annual</b>		
10 PERIOD COVERED	Month    Day    Year <b>7/1/2022</b>		THROUGH    Month    Day    Year <b>12/31/2022</b>
11 ELECTION	ELECTION DATE Month    Day    Year <b>5/6/2023</b>	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <b>City Council District 1</b>	13 OFFICE SOUGHT (if known) <b>Council District 1</b>	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>14 C/OH NAME</b> <b>Mario Bravo</b>	<b>15 Filer ID</b> (Ethics Commission Filers)								
<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.								
<input type="checkbox"/> Additional Pages	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:25%; padding: 5px;">COMMITTEE TYPE</td> <td style="padding: 5px;">COMMITTEE NAME</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> GENERAL</td> <td style="padding: 5px;">COMMITTEE ADDRESS</td> </tr> <tr> <td style="padding: 5px;"><input type="checkbox"/> SPECIFIC</td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td style="padding: 5px;"></td> <td style="padding: 5px;">COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME								
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS								
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	<b>\$ 0</b>							
EXPENDITURE TOTALS	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	<b>\$ 54615.00</b>							
CONTRIBUTION BALANCE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	<b>\$ 0</b>							
OUTSTANDING LOAN TOTALS	4. TOTAL POLITICAL EXPENDITURES	<b>\$ 6363.63</b>							
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	<b>\$ 63238.98</b>							
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	<b>\$ 0</b>							

**18 AFFIDAVIT**

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

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

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

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Mario Bravo, this the 17th day of January, 2023, to certify which, witness my hand and seal of office.

---

Signature of officer administering oath                      Printed name of officer administering oath                      Title of officer administering oath

# SUBTOTALS - COH

FORM C/OH  
COVER SHEET PG 3

<b>19</b> FILER NAME <b>Mario Bravo</b>		<b>20</b> Filer ID (Ethics Commission Filers)
<b>21</b> SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$ 54615.00</b>
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		<b>\$ 0</b>
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		<b>\$ 0</b>
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 6363.63</b>
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		<b>\$ 0</b>
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		<b>\$ 0</b>
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		<b>\$ 0</b>
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		<b>\$ 0</b>
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		<b>\$ 0</b>

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**1 of 43**

2 FILER NAME  
**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7/1/2022**

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

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

6 Contributor address; City; State; Zip Code  
**PO Box 780489  
San Antonio, TX 78276**

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

9 Employer (See instructions)  
**Retired**

Date  
**7/1/2022**

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

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

Contributor address; City; State; Zip Code  
**PO Box 781609  
San Antonio, TX 78278**

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

Employer (See instructions)  
**NA**

Date  
**7/6/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Paul Bishop**

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

Contributor address; City; State; Zip Code  
**923 Ogden St  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Martin, Disiere, Jefferson & Wisdom**

Date  
**7/12/2022**

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

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

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

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

Employer (See instructions)  
**UTSA**

**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 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**7/14/2022**

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

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

6 Contributor address; City; State; Zip Code  
**1554 W Mulberry Ave  
San Antonio, TX 78201**

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

9 Employer (See instructions)  
**Retired**

Date  
**8/8/2022**

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

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

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

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

Employer (See instructions)  
**Martin & Drought**

Date  
**9/19/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Dennis Karbach**

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

Contributor address; City; State; Zip Code  
**315 West Lynwood Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Karbach Consulting LLC**

Date  
**9/20/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jane & Rick Lewis**

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

Contributor address; City; State; Zip Code  
**226 W. Gramercy PI  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Villa Finale**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**3 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**9/21/2022**

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

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

6 Contributor address; City; State; Zip Code  
**218 W. Lullwood Ave  
San Antonio, TX 78212**

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

9 Employer (See instructions)  
**Retired**

Date  
**10/1/2022**

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

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

Contributor address; City; State; Zip Code  
**163 Waxwood Ln  
San Antonio, TX 78216**

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

Employer (See instructions)  
**Alta Architects**

Date  
**10/17/2022**

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

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

Contributor address; City; State; Zip Code  
**242 W Lynwood  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Self**

Date  
**10/17/2022**

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

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

Contributor address; City; State; Zip Code  
**224 W Rosewood  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Retired**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>4 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>10/17/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Anna Gangai Liesman</b>	7 Amount of contribution (\$) <b>35.00</b>
6 Contributor address; City; State; Zip Code <b>302 W Mulberry San Antonio, TX 78212</b>		
8 Principal occupation / Job title (See instructions) <b>NA</b>		9 Employer (See instructions) <b>NA</b>
Date <b>10/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cruz Paloma Cortez</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>930 W Rosewood San Antonio, TX 78201</b>		
Principal occupation / Job title (See instructions) <b>Marketing Consultant</b>		Employer (See instructions) <b>Self</b>
Date <b>10/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Matt Jones</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>PO Box 12037 San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>Consultant</b>		Employer (See instructions) <b>Self</b>
Date <b>10/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>John Cooley</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>7119 Parkside Pl San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Partner</b>		Employer (See instructions) <b>Terramark</b>

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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 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**10/31/2022**

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

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

6 Contributor address; City; State; Zip Code  
**16850 Interstate 20  
Cisco, TX 76437**

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

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

Date  
**10/31/2022**

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

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

Contributor address; City; State; Zip Code  
**826 W Craig Pl  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Christensen Law**

Date  
**11/17/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Charles & Nancy Turner**

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

Contributor address; City; State; Zip Code  
**250 Brahan Blvd  
San Antonio, TX 78215**

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

Employer (See instructions)  
**Terramark**

Date  
**12/11/2022**

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

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

Contributor address; City; State; Zip Code  
**708 Canterbury Hill  
San Antonio, TX 78221**

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

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:  
**6 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/11/2022**

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

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

6 Contributor address; City; State; Zip Code  
**2717 West Martin St  
San Antonio, TX 78207**

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

9 Employer (See instructions)  
**Self**

Date  
**12/13/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Peter Lund**

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

Contributor address; City; State; Zip Code  
**306 Marquis Ln  
San Antonio, TX 78216**

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

Employer (See instructions)  
**Retired**

Date  
**12/13/2022**

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

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

Contributor address; City; State; Zip Code  
**678 Hallmark Path  
San Antonio, TX 78264**

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

Employer (See instructions)  
**Yellow Rose Carriages**

Date  
**12/14/2022**

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

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

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

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:  
**7 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date

**12/14/2022**

5 Full name of contributor

**Kevin Dodd**

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

**500.00**

6 Contributor address;

**9960 Macaway #1  
Adkins, TX 78101**

City; State; Zip Code

8 Principal occupation / Job title (See instructions)

**Self employed**

9 Employer (See instructions)

**Valley Railroad**

Date

**12/14/2022**

Full name of contributor

**E. John Evans**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**1 Waterside Lane  
Essex, CT 06426**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Education**

Employer (See instructions)

**Valley Railroad**

Date

**12/15/2022**

Full name of contributor

**Brendan & Rebecca Clancy**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**19755 Stonehenge Dr  
Mokena, IL 60448**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Manager**

Employer (See instructions)

**E&R Towing**

Date

**12/15/2022**

Full name of contributor

**James Ferguson**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**537 Hickory St  
Peotone, IL 60468**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Consultant**

Employer (See instructions)

**Ferguson Consulting**

**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 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date

**12/15/2022**

5 Full name of contributor

**Landrys Restaurants**

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

**500.00**

6 Contributor address;

**1510 West Loop So**

**Houston, TX 77027**

City; State; Zip Code

8 Principal occupation / Job title (See instructions)

**NA**

9 Employer (See instructions)

**NA**

Date

**12/15/2022**

Full name of contributor

**Killen Griffin Farrimond Pol Comm**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**10101 Reunion Pl**

**San Antonio, TX 78216**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**NA**

Employer (See instructions)

**NA**

Date

**12/19/2022**

Full name of contributor

**Jeff Stave**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**25.00**

Contributor address;

**503 Diamond Falls**

**San Antonio, TX 78251**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Sales**

Employer (See instructions)

**APR**

Date

**12/19/2022**

Full name of contributor

**Blanquita Sullivan**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**35.00**

Contributor address;

**120 Anastacia Place**

**San Antonio, TX 78212**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Designer**

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:  
**9 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/19/2022**

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Kathleen Weir Vale**

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

6 Contributor address; City; State; Zip Code  
**102 East Hollywood Ave  
San Antonio, TX 78212**

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

9 Employer (See instructions)  
**Retired**

Date  
**12/19/2022**

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

Amount of contribution (\$)  
**260.00**

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

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

Employer (See instructions)  
**Self**

Date  
**12/19/2022**

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

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

Contributor address; City; State; Zip Code  
**733 East Woodlawn Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Retired**

Date  
**12/19/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rick Wilson**

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

Contributor address; City; State; Zip Code  
**110 West Elsmere Place  
San Antonio, TX 78212**

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

Employer (See instructions)  
**CSA, Inc.**

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>10 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/19/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Susan Lawton</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>402 Harrison Ave San Antonio, TX 78209</b>		
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>12/20/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jerry Lockey</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>931 West Woodlawn Ave San Antonio, TX 78201</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/20/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tommy Adkisson</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>128 Golden Crown Dr San Antonio, TX 78223</b>		
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Self</b>
Date <b>12/20/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Hubbeling</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>1025 W Huisache Ave San Antonio, TX 78201</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**11 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/20/2022**

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

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

6 Contributor address; City; State; Zip Code  
**1506 West Huisache Ave  
San Antonio, TX 78201**

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

9 Employer (See instructions)  
**Retired**

Date  
**12/20/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Tim Maloney**

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

Contributor address; City; State; Zip Code  
**926 So Alamo  
San Antonio, TX 78205**

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

Employer (See instructions)  
**Maloney & Campolo**

Date  
**12/20/2022**

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

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

Contributor address; City; State; Zip Code  
**5157 Blanco Rd  
San Antonio, TX 78216**

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

Employer (See instructions)  
**Elegant Limousine**

Date  
**12/20/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Julie Mery**

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

Contributor address; City; State; Zip Code  
**5157 Blanco Rd  
San Antonio, TX 78216**

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

Employer (See instructions)  
**GJMery Investments**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>12 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/20/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Frances Barros</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>14918 Sage Blf San Antonio, TX 78216</b>		
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>12/20/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Joe Garcia</b>	Amount of contribution (\$) <b>75.00</b>
Contributor address; City; State; Zip Code <b>3115 Morning Creek San Antonio, TX 78247</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/21/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lucy Wilson</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>130 Magnolia Dr San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/21/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kenneth Brown</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2454 Toftrees San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Brown &amp; Ortiz, P.C.</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**13 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/21/2022**

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

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

6 Contributor address; City; State; Zip Code  
**203 Recoleta Dr  
San Antonio, TX 78216**

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

9 Employer (See instructions)  
**E-Z Bel**

Date  
**12/21/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Cheryl Holt**

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

Contributor address; City; State; Zip Code  
**203 Recoleta Dr  
San Antonio, TX 78216**

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

Employer (See instructions)  
**Retired**

Date  
**12/21/2022**

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

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

Contributor address; City; State; Zip Code  
**301 Encino Ave  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Self Employed**

Date  
**12/21/2022**

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

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

Contributor address; City; State; Zip Code  
**9103 Mellbrook St  
San Antonio, TX 78230**

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

Employer (See instructions)  
**Brown & Ortiz, P.C.**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**14 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date

**12/22/2022**

5 Full name of contributor

**Toni VanBuren**

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

**500.00**

6 Contributor address;

**115 Schreiner Place**

**San Antonio, TX 78212**

City; State; Zip Code

8 Principal occupation / Job title (See instructions)

**Retired**

9 Employer (See instructions)

**Retired**

Date

**12/22/2022**

Full name of contributor

**Bill Avila**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**5 Remington Way**

**San Antonio, TX 78258**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Attorney**

Employer (See instructions)

**Bracewell**

Date

**12/23/2022**

Full name of contributor

**Adrian de Anda**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**10.00**

Contributor address;

**235 Latch Drive**

**San Antonio, TX 78213**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Cashier**

Employer (See instructions)

**Target**

Date

**12/23/2022**

Full name of contributor

**Adan de Anda**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**10.00**

Contributor address;

**6 Three Lakes Dr**

**San Antonio, TX 78248**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Sales rep**

Employer (See instructions)

**Sazerac**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>15 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/23/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Doug Dilley</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>635 S Presa St San Antonio, TX 78210</b>		
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Dilley Law</b>
Date <b>12/23/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Agnes Dilley</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>635 S Presa St San Antonio, TX 78210</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/23/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Deborah Rodriguez</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>322 Calumet Pl San Antonio, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/23/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Inez Gabriel</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>10903 Gabriels Pl San Antonio, TX 78217</b>		
Principal occupation / Job title (See instructions) <b>Owner</b>		Employer (See instructions) <b>Gabriel Holdings</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>16 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/23/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gina Saucedo</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>1506 W Huisache Ave San Antonio, TX 78201</b>		
8 Principal occupation / Job title (See instructions) <b>Self Employed</b>		9 Employer (See instructions) <b>Self</b>
Date <b>12/23/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Michelle Amici</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>4233 Via Marina Marina del Rey, CA 90292</b>		
Principal occupation / Job title (See instructions) <b>Talent Acquisition Consultant</b>		Employer (See instructions) <b>KMW Recruitment</b>
Date <b>12/24/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kelly Walls</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>9103 Contessa Dr San Antonio, TX 78216</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/25/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Houston Carpenter</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>250 Washington San Antonio, TX 78204</b>		
Principal occupation / Job title (See instructions) <b>Sub Contractor</b>		Employer (See instructions) <b>Central Texas Lath &amp; Plaster</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**17 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/25/2022**

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

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

6 Contributor address; City; State; Zip Code  
**250 Washington  
San Antonio, TX 78204**

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

9 Employer (See instructions)  
**Little Ems**

Date  
**12/26/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Cris Eugster**

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

Contributor address; City; State; Zip Code  
**203 Belvidere  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Evergreen**

Date  
**12/27/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Tom Corser**

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

Contributor address; City; State; Zip Code  
**10321 Sunflower Lane  
San Antonio, TX 78213**

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

Employer (See instructions)  
**Retired**

Date  
**12/27/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Pablo Escamilla**

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

Contributor address; City; State; Zip Code  
**700 North Saint Marys St  
San Antonio, TX 78205**

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

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**18 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date

**12/27/2022**

5 Full name of contributor

**Mitch Meyer**

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

**500.00**

6 Contributor address;

City;

State;

Zip Code

**9 Penny Lane**

**San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)

**Real Estate**

9 Employer (See instructions)

**Loopy Limited**

Date

**12/27/2022**

Full name of contributor

**Dan Deane**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

City;

State;

Zip Code

**215 Wyanoke Dr**

**San Antonio, TX 78209**

Principal occupation / Job title (See instructions)

**Retired**

Employer (See instructions)

**Retired**

Date

**12/27/2022**

Full name of contributor

**Gemma Kennedy**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**250.00**

Contributor address;

City;

State;

Zip Code

**509 River Rd**

**San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

**Retired**

Employer (See instructions)

**Retired**

Date

**12/27/2022**

Full name of contributor

**Lynn Boyd**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**250.00**

Contributor address;

City;

State;

Zip Code

**143 E Agarita Ave**

**San Antonio, TX 78212**

Principal occupation / Job title (See instructions)

**Realtor**

Employer (See instructions)

**Phyllis Browning Co.**

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# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>19 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/27/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Cynthia Spielman</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>900 W Woodlawn San Antonio, TX 78201</b>		
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>12/27/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Katherine Bravo</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>1564 W Mulberry Ave San Antonio, TX 78201</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/27/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Armando Bravo</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>1564 W Mulberry Ave San Antonio, TX 78201</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/27/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Hector Cardenas</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>539 W Elsmere PI San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>20 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/27/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Barbara Witte-Howell</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>105 Magnolia Dr San Antonio, TX 78212</b>		
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>12/27/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Vincent Michael</b>	Amount of contribution (\$) <b>30.00</b>
Contributor address; City; State; Zip Code <b>826 W Craig Pl San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>NA</b>		Employer (See instructions) <b>NA</b>
Date <b>12/27/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Daniel Deane</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>215 WYANOKE DR SAN ANTONIO, TX 78209</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/28/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Gilberto Ocanas</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>7 Champions Run San Antonio, TX 78258</b>		
Principal occupation / Job title (See instructions) <b>Advisory</b>		Employer (See instructions) <b>Ocanas group</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/28/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Melissa Amici-Haynes</b>	7 Amount of contribution (\$) <b>10.00</b>
6 Contributor address; City; State; Zip Code <b>2702 Fremont St Laredo, TX 78043</b>		
8 Principal occupation / Job title (See instructions) <b>NA</b>		9 Employer (See instructions) <b>NA</b>
Date <b>12/28/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jim Dow</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>504 W 12th St Austin, TX 78701</b>		
Principal occupation / Job title (See instructions) <b>Managing Partner</b>		Employer (See instructions) <b>Cross Oak Group</b>
Date <b>12/28/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ana Amici</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>6 Three Lakes Dr San Antonio, TX 78248</b>		
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>Courts</b>
Date <b>12/28/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Hope Andrade</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>123 Lexington Avenue San Antonio, TX 78205</b>		
Principal occupation / Job title (See instructions) <b>Entrepreneur</b>		Employer (See instructions) <b>Self</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>22 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/28/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Brett Cohen</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>319 East Jones Ave San Antonio, TX 78215</b>		
8 Principal occupation / Job title (See instructions) <b>Real Estate</b>		9 Employer (See instructions) <b>Self - Craigmont Capital</b>
Date <b>12/28/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robert Gutierrez</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>311 Huntington Place San Antonio, TX 78231</b>		
Principal occupation / Job title (See instructions) <b>Development</b>		Employer (See instructions) <b>Republic Land &amp; Development Company</b>
Date <b>12/28/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rebecca Leyendecker</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>311 Huntington Place San Antonio, TX 78231</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/29/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Isabella Haynes</b>	Amount of contribution (\$) <b>10.00</b>
Contributor address; City; State; Zip Code <b>2702 Fremont St Laredo, TX 78043</b>		
Principal occupation / Job title (See instructions) <b>College Student</b>		Employer (See instructions) <b>College Student</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**23 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/29/2022**

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

7 Amount of contribution (\$)  
**10.00**

6 Contributor address; City; State; Zip Code  
**2104 North Martin Ave  
Laredo, TX 78043**

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

9 Employer (See instructions)  
**Mesquite Energy**

Date  
**12/29/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Elena Amici**

Amount of contribution (\$)  
**10.00**

Contributor address; City; State; Zip Code  
**2702 Fremont St  
Laredo, TX 78043**

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

Employer (See instructions)  
**Retired**

Date  
**12/29/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rosi de Anda**

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

Contributor address; City; State; Zip Code  
**212 Flores Ave  
Laredo, TX 78040**

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

Employer (See instructions)  
**Self**

Date  
**12/29/2022**

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

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

Contributor address; City; State; Zip Code  
**823 Hoefgen Ave  
San Antonio, TX 78210**

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

Employer (See instructions)  
**Ramos & del Cueto**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**24 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date

**12/29/2022**

5 Full name of contributor

**Lukin T Gilliland Jr**

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

**500.00**

6 Contributor address;

**901 NE Loop 410 #909  
San Antonio, TX 78209**

City; State; Zip Code

8 Principal occupation / Job title (See instructions)

**Investor**

9 Employer (See instructions)

**Self**

Date

**12/29/2022**

Full name of contributor

**Sam Asvestas**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**701 West Poplar St  
San Antonio, TX 78212**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Retired**

Employer (See instructions)

**Retired**

Date

**12/29/2022**

Full name of contributor

**Bernice Beck**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**223 West Hollywood Ave  
San Antonio, TX 78212**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Retired**

Employer (See instructions)

**Retired**

Date

**12/29/2022**

Full name of contributor

**Mark Wohlfarth**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**500.00**

Contributor address;

**237 West Travis St  
San Antonio, TX 78205**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**General Contractor**

Employer (See instructions)

**The Sabinal Group**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**25 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/29/2022**

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

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

6 Contributor address; City; State; Zip Code  
**1304 Fullerton Ave  
McAllen, TX 78504**

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

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

Date  
**12/29/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Alice Viroslav**

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

Contributor address; City; State; Zip Code  
**715 Elizabeth Road  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Radsourc**

Date  
**12/29/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Sergio Viroslav**

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

Contributor address; City; State; Zip Code  
**715 Elizabeth Road  
San Antonio, TX 78209**

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

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

Date  
**12/29/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Federica Covey**

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

Contributor address; City; State; Zip Code  
**4515 San Pedro Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Homemaker**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**26 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/29/2022**

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

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

6 Contributor address; City; State; Zip Code  
**1202 W Bitters  
San Antonio, TX 78216**

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

9 Employer (See instructions)  
**Gordon V Hartman Foundation**

Date  
**12/29/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Anisa Schell**

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

Contributor address; City; State; Zip Code  
**430 E Mistletoe Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**City of San Antonio**

Date  
**12/29/2022**

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

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

Contributor address; City; State; Zip Code  
**13307 Queensland  
San Antonio, TX 78232**

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

Employer (See instructions)  
**Martinez & Assoc**

Date  
**12/29/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Claudia Marquez-Acuna**

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

Contributor address; City; State; Zip Code  
**13307 Queensland  
San Antonio, TX 78232**

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

Employer (See instructions)  
**Martinez & Assoc**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>27 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/29/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Robin Teague</b>	7 Amount of contribution (\$) <b>150.00</b>
6 Contributor address; City; State; Zip Code <b>306 W Kings Hwy San Antonio, TX 78212</b>		
8 Principal occupation / Job title (See instructions) <b>Retired</b>		9 Employer (See instructions) <b>Retired</b>
Date <b>12/29/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Aida Zaragoza</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>17 Campden Circle San Antonio, TX 78218</b>		
Principal occupation / Job title (See instructions) <b>Attorney</b>		Employer (See instructions) <b>TRLA</b>
Date <b>12/29/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mario Llano</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>1823 Basse Rd San Antonio, TX 78213</b>		
Principal occupation / Job title (See instructions) <b>Chief of Staff</b>		Employer (See instructions) <b>City of San Antonio</b>
Date <b>12/29/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mary Nethery</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>318 Pereida St San Antonio, TX 78210</b>		
Principal occupation / Job title (See instructions) <b>Business Development &amp; Sales</b>		Employer (See instructions) <b>Hoffman Ospina</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**28 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/30/2022**

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

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

6 Contributor address; City; State; Zip Code  
**165 Scenic bluffs Dr  
Boerne, TX 78006**

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

9 Employer (See instructions)  
**Bubblebath Carwash**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Harry Adams**

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

Contributor address; City; State; Zip Code  
**2319 Fountain Way  
San Antonio, TX 78248**

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

Employer (See instructions)  
**McCombs Enterprises**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Gabby Bell**

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

Contributor address; City; State; Zip Code  
**14 Venice Court  
San Antonio, TX 78257**

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

Employer (See instructions)  
**Willies Grill and Icehouse**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Kaye Scarpone**

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

Contributor address; City; State; Zip Code  
**14 Venice Court  
San Antonio, TX 78258**

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

Employer (See instructions)  
**Retired**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**29 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/30/2022**

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

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

6 Contributor address; City; State; Zip Code  
**714 Cenizo Boulevard  
Uvalde, TX 78801**

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

9 Employer (See instructions)  
**Retired**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**April Maxey**

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

Contributor address; City; State; Zip Code  
**830 Bonita Dr  
South Pasadena, CA 91030**

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

Employer (See instructions)  
**Self**

Date  
**12/30/2022**

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

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

Contributor address; City; State; Zip Code  
**1422 Camden Cove  
San Antonio, TX 78258**

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

Employer (See instructions)  
**Southern Air**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Erin Zayko**

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

Contributor address; City; State; Zip Code  
**714 W. Russell PI  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Environmental Stewardship Engineer**

Employer (See instructions)  
**Lockheed Martin**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**30 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/30/2022**

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

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

6 Contributor address; City; State; Zip Code  
**112 E Pecan St #1200  
San Antonio, TX 78205**

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

9 Employer (See instructions)  
**Haynes Boone**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Tim Swan**

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

Contributor address; City; State; Zip Code  
**8 Rockridge Ln  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Retired**

Date  
**12/30/2022**

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

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

Contributor address; City; State; Zip Code  
**500 6th Street  
San Antonio, TX 78215**

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

Employer (See instructions)  
**500 Sixth**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Caleb Etheredge**

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

Contributor address; City; State; Zip Code  
**535 Leigh St  
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)  
**Landscape Architect**

Employer (See instructions)  
**Coral Studio**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**31 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/30/2022**

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

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

6 Contributor address; City; State; Zip Code  
**110 N Manton Ln  
San Antonio, TX 78213**

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

9 Employer (See instructions)  
**Elsewhere Garden Bar**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Malcolm Hartman Jr**

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

Contributor address; City; State; Zip Code  
**207 Primera Dr  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Tycoon Flats Restaurant**

Date  
**12/30/2022**

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

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

Contributor address; City; State; Zip Code  
**2420 McCullough Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Retired**

Date  
**12/30/2022**

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

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

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

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

Employer (See instructions)  
**Retired**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**32 of 43**

2 FILER NAME  
**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/30/2022**

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

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

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

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

9 Employer (See instructions)  
**Self**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Kevin Covey**

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

Contributor address; City; State; Zip Code  
**4515 San Pedro Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Ithaca Investments**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Beatriz Covey**

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

Contributor address; City; State; Zip Code  
**4515 San Pedro Ave  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Self**

Date  
**12/30/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Jasmine Azima**

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

Contributor address; City; State; Zip Code  
**PO Box 91012  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Jasmine Engineering**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>33 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/31/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jennifer Rodriguez</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>1122 Colorado #2399 Driftwood, TX 78701</b>		
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Self Employed</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Chloie Kay Bell MacGregor</b>	Amount of contribution (\$) <b>5.00</b>
Contributor address; City; State; Zip Code <b>2316 Wirth Pl New Orleans, LA 70115</b>		
Principal occupation / Job title (See instructions) <b>Law student</b>		Employer (See instructions) <b>Loyola University New Orleans College of Law</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jo Ellen Cockroft</b>	Amount of contribution (\$) <b>20.00</b>
Contributor address; City; State; Zip Code <b>PO Box 63627 Pipe Creek, TX 78063</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Karl Franklin</b>	Amount of contribution (\$) <b>20.00</b>
Contributor address; City; State; Zip Code <b>446 East French Place San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**34 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date

**12/31/2022**

5 Full name of contributor

**Andres de Anda**

out-of-state PAC (ID# \_\_\_\_\_)

7 Amount of contribution (\$)

**20.00**

6 Contributor address;

**1507 Napoleon Ave**

**New Orleans, LA 70115**

City; State; Zip Code

8 Principal occupation / Job title (See instructions)

**Student**

9 Employer (See instructions)

**NA**

Date

**12/31/2022**

Full name of contributor

**Bryan Burns**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**25.00**

Contributor address;

**217 Terry Court**

**San Antonio, TX 78212**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**Carpenter**

Employer (See instructions)

**Self**

Date

**12/31/2022**

Full name of contributor

**Sofia Drage**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**50.00**

Contributor address;

**7921 Eagle Mills Rd**

**Waite Hill, OH 44094**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**College student**

Employer (See instructions)

**School of Visual Arts**

Date

**12/31/2022**

Full name of contributor

**Samuel Aguirre**

out-of-state PAC (ID# \_\_\_\_\_)

Amount of contribution (\$)

**50.00**

Contributor address;

**466 East French Place**

**San Antonio, TX 78212**

City; State; Zip Code

Principal occupation / Job title (See instructions)

**City Attorney**

Employer (See instructions)

**City of Seguin**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**35 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/31/2022**

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

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

6 Contributor address; City; State; Zip Code  
**1227 Sunset View  
San Antonio, TX 78258**

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

9 Employer (See instructions)  
**Texadelphia Interest**

Date  
**12/31/2022**

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

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

Contributor address; City; State; Zip Code  
**470 42nd St  
Brooklyn, NY 11232**

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

Employer (See instructions)  
**Self**

Date  
**12/31/2022**

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

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

Contributor address; City; State; Zip Code  
**470 42nd St  
Brooklyn, NY 11232**

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

Employer (See instructions)  
**Self**

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Stephen Lucke**

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

Contributor address; City; State; Zip Code  
**122 Timberlane Dr  
San Antonio, TX 78209**

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

Employer (See instructions)  
**Gardopia Gardens**

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**36 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/31/2022**

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

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

6 Contributor address; City; State; Zip Code  
**6 Three Lakes Dr  
San Antonio, TX 78248**

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

9 Employer (See instructions)  
**Maxey Energy Company**

Date  
**12/31/2022**

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

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

Contributor address; City; State; Zip Code  
**423 E French Pl  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Avance inc**

Date  
**12/31/2022**

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

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

Contributor address; City; State; Zip Code  
**1803 South Presa St  
San Antonio, TX 78210**

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

Employer (See instructions)  
**Self**

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Rico Riojas**

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

Contributor address; City; State; Zip Code  
**7113 San Pedro Ave  
San Antonio, TX 78229**

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

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: <b>37 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/31/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Jessica Kelly</b>	7 Amount of contribution (\$) <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>1730 Susquehannock Dr McLean, VA 22101</b>		
8 Principal occupation / Job title (See instructions) <b>Homemaker</b>		9 Employer (See instructions) <b>Self</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>George Rice</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>414 East French Place San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>Hydrologist</b>		Employer (See instructions) <b>Self</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Maria Sandoval</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>101 Lindell Place San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ramiro Cavazos</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>226 Granville Way San Antonio, TX 78231</b>		
Principal occupation / Job title (See instructions) <b>CEO</b>		Employer (See instructions) <b>US Hispanic Chamber of Commerce</b>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
**38 of 43**

2 FILER NAME  
**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/31/2022**

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

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

6 Contributor address; City; State; Zip Code  
**306 Carismatic Lane  
Austin, TX 78748**

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

9 Employer (See instructions)  
**Retired**

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Kenneth Wilson**

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

Contributor address; City; State; Zip Code  
**6519 Pemwoods  
San Antonio, TX 78240**

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

Employer (See instructions)  
**Self**

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Katie Dixon**

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

Contributor address; City; State; Zip Code  
**431 E French PI  
San Antonio, TX 78212**

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

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

Date  
**12/31/2022**

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

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

Contributor address; City; State; Zip Code  
**535 E Craig PI  
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)  
**Author/ rancher**

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:  
**39 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/31/2022**

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

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

6 Contributor address; City; State; Zip Code  
**2926 North Saint Marys St  
San Antonio, TX 78212**

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

9 Employer (See instructions)  
**Tycoon Flats**

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Tomeka Pierce**

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

Contributor address; City; State; Zip Code  
**318 W Grayson St  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Level 1 AG LLC**

Date  
**12/31/2022**

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

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

Contributor address; City; State; Zip Code  
**233 West Hermine Boulevard  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Retired**

Date  
**12/31/2022**

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

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

Contributor address; City; State; Zip Code  
**233 West Hermine Boulevard  
San Antonio, TX 78212**

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

Employer (See instructions)  
**Retired**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>40 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/31/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mark Rodriguez</b>	7 Amount of contribution (\$) <b>500.00</b>
6 Contributor address; City; State; Zip Code <b>1122 Colorado #2399 Driftwood, TX 78701</b>		
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Rodriguez Law</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Camille Brigant</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2540 West Gramercy Place San Antonio, TX 78228</b>		
Principal occupation / Job title (See instructions) <b>Realtor</b>		Employer (See instructions) <b>Motif</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Paul Covey</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>4515 San Pedro Ave San Antonio, TX 78212</b>		
Principal occupation / Job title (See instructions) <b>Self Employed</b>		Employer (See instructions) <b>Ithaca Investments</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Debbie Ruiz</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>13554 Norland San Antonio, TX 78232</b>		
Principal occupation / Job title (See instructions) <b>Self Employed</b>		Employer (See instructions) <b>Self</b>

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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:  
**41 of 43**

2 FILER NAME

**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

4 Date  
**12/31/2022**

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

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

6 Contributor address; City; State; Zip Code  
**13554 Norland  
San Antonio, TX 78232**

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

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

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Mack Mandell**

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

Contributor address; City; State; Zip Code  
**610 E Market St  
San Antonio, TX 78205**

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

Employer (See instructions)  
**Self**

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Karen Crossman**

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

Contributor address; City; State; Zip Code  
**610 E Market St  
San Antonio, TX 78205**

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

Employer (See instructions)  
**Retired**

Date  
**12/31/2022**

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
**Linebarger Goggan Blair & Sampson**

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

Contributor address; City; State; Zip Code  
**PO Box 17428  
Austin, TX 78760**

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

Employer (See instructions)  
**NA**

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>42 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/31/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Enrique Valdivia</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>530 Donaldson San Antonio, TX 78201</b>		
8 Principal occupation / Job title (See instructions) <b>Attorney</b>		9 Employer (See instructions) <b>Texas RioGrande legal aid</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Kelly Walls</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>9103 Contessa Dr San Antonio, TX 78216</b>		
Principal occupation / Job title (See instructions) <b>Retired</b>		Employer (See instructions) <b>Retired</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Brendan Drage</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>7921 Eagle Road Waite Hill, OH 44094</b>		
Principal occupation / Job title (See instructions) <b>CEO</b>		Employer (See instructions) <b>Remelt</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sylvain Brigant</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>2540 West Gramercy Place San Antonio, TX 78228</b>		
Principal occupation / Job title (See instructions) <b>Buyer</b>		Employer (See instructions) <b>H-E-B</b>

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>43 of 43</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>12/31/2022</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Mark Brownstein</b>	7 Amount of contribution (\$) <b>250.00</b>
6 Contributor address; City; State; Zip Code <b>23 Fairview Terrace Maplewood, NJ 07040</b>		
8 Principal occupation / Job title (See instructions) <b>Senior VP</b>		9 Employer (See instructions) <b>Environmental Defense Fund</b>
Date <b>12/31/2022</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Diega Bravo</b>	Amount of contribution (\$) <b>500.00</b>
Contributor address; City; State; Zip Code <b>7921 Eagle Road Waite Hill, OH 44094</b>		
Principal occupation / Job title (See instructions) <b>Self Employed</b>		Employer (See instructions) <b>Self</b>
Date	Full name of contributor <input type="checkbox"/> 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 <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See instructions)		Employer (See instructions)

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**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: <b>1 of 1</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$ 0</b>
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

# PLEGGED CONTRIBUTIONS

# SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: <b>1 of 1</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		<b>\$ 0</b>
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)

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



# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: <b>1 of 1</b>
<b>2</b> FILER NAME <b>Mario Bravo</b>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$ 0</b>
<b>5</b> Date of loan	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)	<b>9</b> Loan Amount (\$)
<b>6</b> Is lender a financial institution?	<b>8</b> Lender address; . . . . . City; State; Zip Code	<b>10</b> Interest rate
		<b>11</b> Maturity date
<b>12</b> Principal occupation / Job title (See instructions)		<b>13</b> Employer (See instructions)
<b>14</b> Description of Collateral <input type="checkbox"/> none		<b>15</b> <input type="checkbox"/> Check if personal funds were deposited into political account (See instructions)
<b>16</b> GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; . . . . . City; State; Zip Code	
<b>20</b> Principal occupation (See instructions)		<b>21</b> Employer (See instructions)
Date of loan	Name of lender <input type="checkbox"/> 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 <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION  <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; . . . . . City; State; Zip Code	
Principal occupation (See instructions)		Employer (See instructions)

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**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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>1 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <b>7/6/2022</b>	<b>5</b> Payee name <b>anedot</b>
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<b>6</b> Amount (\$) <b>1.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>
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<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>7/11/2022</b>	Payee name <b>Isaac Fellows</b>
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Amount (\$) <b>233.90</b>	Payee address; City; State; Zip Code <b>11611 Purple Mint San Antonio, TX 78245</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other:</b>	Description <b>constituent work</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>7/14/2022</b>	Payee name <b>anedot</b>
--------------------------	-----------------------------

Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>2 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>7/15/2022</b>	<b>5</b> Payee name <b>DNH*GODADDY.COM</b>	
<b>6</b> Amount (\$) <b>22.35</b>	<b>7</b> Payee address; City; State; Zip Code <b>14455 N Hayden Rd Scottsdale, AZ 85260</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>web services</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>7/18/2022</b>	Payee name <b>DNH*GODADDY.COM</b>		
Amount (\$) <b>140.65</b>	Payee address; City; State; Zip Code <b>14455 N Hayden Rd Scottsdale, AZ 85260</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>web services</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>7/21/2022</b>	Payee name <b>MAILCHIMP</b>		
Amount (\$) <b>92.74</b>	Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other:</b>	Description <b>email marketing</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>3 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/5/2022</b>	<b>5</b> Payee name <b>Isaac Fellows</b>	
<b>6</b> Amount (\$) <b>420.54</b>	<b>7</b> Payee address; City; State; Zip Code <b>11611 Purple Mint San Antonio, TX 78245</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other:</b>	<b>(b)</b> Description <b>constituent work</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>8/8/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name	Office sought	Office held	

Date <b>8/16/2022</b>	Payee name <b>DNH*GODADDY.COM</b>		
Amount (\$) <b>22.35</b>	Payee address; City; State; Zip Code <b>14455 N Hayden Rd Scottsdale, AZ 85260</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>web services</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name	Office sought	Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>4 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>8/22/2022</b>	<b>5</b> Payee name <b>MAILCHIMP</b>	
<b>6</b> Amount (\$) <b>92.74</b>	<b>7</b> Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other:</b>	<b>(b)</b> Description <b>email marketing</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>8/30/2022</b>	Payee name <b>Mario Pena</b>		
Amount (\$) <b>400.00</b>	Payee address; City; State; Zip Code <b>343 W Hollywood Ave San Antonio, TX 78212</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other:</b>	Description <b>reimbursement</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>9/16/2022</b>	Payee name <b>DNH*GODADDY.COM</b>		
Amount (\$) <b>22.35</b>	Payee address; City; State; Zip Code <b>14455 N Hayden Rd Scottsdale, AZ 85260</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>web services</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>5 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/19/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>9/20/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>9/21/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>2.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>6 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/21/2022</b>	<b>5</b> Payee name <b>MAILCHIMP</b>	
<b>6</b> Amount (\$) <b>92.74</b>	<b>7</b> Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other:</b>	<b>(b)</b> Description <b>email marketing</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>10/1/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>10/17/2022</b>	Payee name <b>DNH*GODADDY.COM</b>	
Amount (\$) <b>22.35</b>	Payee address; City; State; Zip Code <b>14455 N Hayden Rd Scottsdale, AZ 85260</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>web services</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>7 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>10/21/2022</b>	<b>5</b> Payee name <b>MAILCHIMP</b>	
<b>6</b> Amount (\$) <b>92.74</b>	<b>7</b> Payee address;                      City;    State;    Zip Code <b>675 Ponce de Leon Ave NE #5000</b> <b>Atlanta, GA 30308</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other:</b>	<b>(b)</b> Description <b>email marketing</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>11/16/2022</b>	Payee name <b>DNH*GODADDY.COM</b>		
Amount (\$) <b>22.35</b>	Payee address;                      City;    State;    Zip Code <b>14455 N Hayden Rd</b> <b>Scottsdale, AZ 85260</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>web services</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>11/21/2022</b>	Payee name <b>MAILCHIMP</b>		
Amount (\$) <b>92.74</b>	Payee address;                      City;    State;    Zip Code <b>675 Ponce de Leon Ave NE #5000</b> <b>Atlanta, GA 30308</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other:</b>	Description <b>email marketing</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>8 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/11/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>10.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/11/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/13/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>9 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/13/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>4.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/14/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/14/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>10 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/14/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/15/2022</b>	Payee name <b>DNH*GODADDY.COM</b>	
Amount (\$) <b>22.35</b>	Payee address; City; State; Zip Code <b>14455 N Hayden Rd Scottsdale, AZ 85260</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>web services</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/16/2022</b>	Payee name <b>Stanford Campaigns</b>	
Amount (\$) <b>3000.00</b>	Payee address; City; State; Zip Code <b>1554 W Mulberry San Antonio, TX 78201</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other:</b>	Description <b>consulting</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

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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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>11 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/19/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>1.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/19/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>1.70</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/19/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>10.70</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>12 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/19/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/19/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/19/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>13 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/19/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>2.30</b>	<b>7</b> Payee address;                      City;    State;    Zip Code <b>1340 Poydras</b> <b>New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/20/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>2.30</b>	Payee address;                      City;    State;    Zip Code <b>1340 Poydras</b> <b>New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/20/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>4.30</b>	Payee address;                      City;    State;    Zip Code <b>1340 Poydras</b> <b>New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>14 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/20/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>4.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/20/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <b>12/21/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>15 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/21/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/21/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>8.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/21/2022</b>	Payee name <b>MAILCHIMP</b>		
Amount (\$) <b>92.74</b>	Payee address; City; State; Zip Code <b>675 Ponce de Leon Ave NE #5000 Atlanta, GA 30308</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other:</b>	Description <b>email marketing</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>16 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/21/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>40.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/22/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/23/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>17 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/23/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>0.70</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/23/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>0.70</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/24/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>18 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/25/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>40.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/26/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/27/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>19 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/27/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/27/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/27/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>20 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/27/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>6.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/28/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>40.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/28/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>21 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/28/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>10.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/28/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/28/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>0.70</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>22 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/28/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>4.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/28/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>23 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/29/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>4.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>0.70</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>0.70</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>24 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/29/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>0.70</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>25 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/29/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>14.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>26 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/29/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>40.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/29/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>40.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>40.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>27 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/30/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>40.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>28 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/30/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>10.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <b>12/30/2022</b>	Candidate / Officeholder name <b>anedot</b>	Office sought  Office held
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <b>12/30/2022</b>	Candidate / Officeholder name <b>anedot</b>	Office sought  Office held
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

**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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>29 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/30/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>30 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/30/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>1.10</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>1.10</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>31 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/30/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>1.10</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>1.10</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/30/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>2.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>32 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/30/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>4.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>33 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>4.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>4.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>34 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>2.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>2.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>2.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>35 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>2.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>2.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>2.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>36 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>2.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>1.10</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>1.10</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>37 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>1.10</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>38 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>20.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>20.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>	
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>39 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>10.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>40 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>10.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>10.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>8.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>41 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>0.50</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>1.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name	Office sought	Office held	

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>40.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>42 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>40.30</b>	<b>7</b> Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>40.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date <b>12/31/2022</b>	Payee name <b>anedot</b>		
Amount (\$) <b>40.30</b>	Payee address; City; State; Zip Code <b>1340 Poydras New Orleans, LA 70112</b>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) <b>Other: other</b>	Description <b>contribution processing fee</b>	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F1: <b>43 of 43</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>12/31/2022</b>	<b>5</b> Payee name <b>anedot</b>	
<b>6</b> Amount (\$) <b>40.30</b>	<b>7</b> Payee address;                      City;    State;    Zip Code <b>1340 Poydras</b> <b>New Orleans, LA 70112</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See categories listed at the top of this schedule) <b>Other: other</b>	<b>(b)</b> Description <b>contribution processing fee</b>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

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

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

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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

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

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

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

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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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  
**Mario Bravo**

**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	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 Candidate/Officeholder/Political Committee	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form

<b>1</b> Total pages Schedule F4: <b>1 of 1</b>	<b>2</b> FILER NAME <b>Mario Bravo</b>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	<b>\$ 0</b>
--	-------------

<b>5</b> Date	<b>6</b> Payee name
---------------	---------------------

<b>7</b> Amount (\$)	<b>8</b> Payee address; City; State; Zip Code
----------------------	---

<b>9</b> TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---

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

<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
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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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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

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

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



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

## SCHEDULE H

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking 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)
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**The Instruction Guide explains how to complete this form**

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

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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE I**

The Instruction Guide explains how to complete this form.

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

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

## SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:  
1 of 1

2 FILER NAME  
**Mario Bravo**

3 Filer ID (Ethics Commission Filers)

<b>4</b> Date	<b>5</b> Name of person from whom amount is received	<b>8</b> Amount (\$)
	..... <b>6</b> Address of person from whom amount is received; City; State; Zip Code	
	<b>7</b> Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
	..... Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
	..... Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

Date	Name of person from whom amount is received	Amount (\$)
	..... Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer	

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

**SCHEDULE T**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: <b>1 of 1</b>
2 FILER NAME <b>Mario Bravo</b>		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
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: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
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: <input type="checkbox"/> Schedule A2 <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule B(J) <input type="checkbox"/> Schedule C2 <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F1 <input type="checkbox"/> Schedule F2 <input type="checkbox"/> Schedule F4 <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule COH-UC <input type="checkbox"/> Schedule B-SS		
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)	

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**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  
**Mario Bravo**

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