

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Manny Pelaez	15 Filer ID (Ethics Commission Filers)
--------------------------------------------	-----------------------------------------------

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

17 CONTRIBUTION TOTALS EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 23460.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 38369.18
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8963.24
	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 AFFIDAVIT

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

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Manny Pelaez, this the 15th day of July, 2024, to certify which, witness my hand and seal of office.

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

SUBTOTALS - COH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Manny Pelaez		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 23226.50
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 233.50
3. <input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0
4. <input checked="" type="checkbox"/> SCHEDULE E: LOANS		\$ 0
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 36538.57
6. <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0
7. <input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$ 1830.61
10. <input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$ 0
11. <input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 0
12. <input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 15

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/7/2024

5 Full name of contributor out-of-state PAC (ID# _____)
Cesar Briones

7 Amount of contribution (\$)
0.50

6 Contributor address; City; State; Zip Code
**732 Stoneway Dr
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
Co-Founder

9 Employer (See instructions)
Herospace

Date
4/7/2024

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

Amount of contribution (\$)
1.00

Contributor address; City; State; Zip Code
**135 Furr Dr
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self-employed

Date
4/9/2024

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

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**14919 Hidden Glen Woods
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
4/9/2024

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**1426 Azul Way
San Antonio, TX 78224**

Principal occupation / Job title (See instructions)
Coordinator

Employer (See instructions)
SAISD

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 15
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Samuel Mcculloch	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 4610 Hawthorn Woods San Antonio, TX 78249		
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Self-employed
Date 4/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Shearn	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 1405 Spyglass Dr Austin, TX 78746		
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 4/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Michael Kennick	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 8323 Magdalena Run San Antonio, TX 78023		
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) BES Enterprises Architecture
Date 4/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gary Greenberg	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 5311 Auburn Rdg San Antonio, TX 78249		
Principal occupation / Job title (See instructions) Constulant		Employer (See instructions) Self-employed

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3 of 15
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jason Claunch	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 4719 Cole Ave #404 Dallas, TX 75205		
8 Principal occupation / Job title (See instructions) Director of Operations		9 Employer (See instructions) Iron Cactus
Date 4/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Matthew Starr	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 7334 Blanco Rd #200 San Antonio, TX 78216		
Principal occupation / Job title (See instructions) COO		Employer (See instructions) Foresight Asset Management
Date 4/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Diane Rath	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 68 Bristol Green San Antonio, TX 78209		
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 4/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brent Farney	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 8258 Pimlico Ln Boerne, TX 78015		
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Griffen Famy Cemetary-employed

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
4 of 15

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/10/2024

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**28 Grantham Gln
San Antonio, TX 78257**

8 Principal occupation / Job title (See instructions)
CEO

9 Employer (See instructions)
Parra & Co

Date
4/10/2024

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

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**3128 Napier Park
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)
Real Estate

Employer (See instructions)
Self-employed

Date
4/10/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**847 E Ashby Pl #679
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Griffen Famy Cemetary-employed

Date
4/11/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**000 000
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)
Self-employed

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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 15

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
4/11/2024

5 Full name of contributor out-of-state PAC (ID# _____)
Francisco Guerra

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
**000 000
San Antonio, TX 78201**

8 Principal occupation / Job title (See instructions)
Self-employed

9 Employer (See instructions)
Self-employed

Date
4/11/2024

Full name of contributor out-of-state PAC (ID# _____)
Brown & McDonald

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**100 NE Loop 410
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
4/11/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**23930 Spring Scent
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Founder

Employer (See instructions)
Renu Robotics

Date
4/11/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**823 Arion #Pkw
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Joeris Construction

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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 15
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rene Capistran	7 Amount of contribution (\$) 1000.00
6 Contributor address; City; State; Zip Code 3512 La Soledad Court Brownsville, TX 78520		
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Self-employed
Date 4/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fermin Rajunov	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 5 Wayward Oaks San Antonio, TX 78248		
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 4/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ronnie Sanders	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 118 Summertime Dr San Antonio, TX 78216		
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 4/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carla Ruiz	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 18 Devon Wood San Antonio, TX 78257		
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Self-employed

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
5/14/2024

5 Full name of contributor out-of-state PAC (ID# _____)
Ryan Moe

7 Amount of contribution (\$)
1000.00

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

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Ryan Moe PC

Date
5/20/2024

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

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**10107 McAllister Fwy.
San Antonio, TX 78254**

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)
Self-employed

Date
5/20/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**78 Island Blvd
Fox Island, WA 98333**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Loyd Law Firm

Date
5/23/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**207 Woodcrest
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Reustoff & Sanders

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
5/23/2024

5 Full name of contributor out-of-state PAC (ID# _____)
Marcella Della Casa

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**335 Brees Blvd
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Burleson LLP

Date
5/23/2024

Full name of contributor out-of-state PAC (ID# _____)
Michael De La Paz

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1100 N W Loop 410 #360
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self-employed

Date
5/23/2024

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

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**127 W Woodlawn Ave
San Antonio , TX 78312**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Escamilla Poneck

Date
5/23/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**116 La Rue Ann Ct
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Self-employed

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:
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2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
5/23/2024

5 Full name of contributor out-of-state PAC (ID# _____)
Bret Green

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**11107 Wurzbach #103
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)
Attorney

9 Employer (See instructions)
Green Legal

Date
5/28/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**105 Villa Ann St
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Langley & Banack

Date
6/3/2024

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

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**6812 West Ave #100
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Mosaic Land Development

Date
6/27/2024

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**12803 Castle George St
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Self-employed

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: 10 of 15
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bret Green	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 11107 Wurzbach #103 San Antonio, TX 78230		
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Green Legal
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Eliot Howard	Amount of contribution (\$) 25.00
Contributor address; City; State; Zip Code 15522 Oak Grove Dr San Antonio, TX 78255		
Principal occupation / Job title (See instructions) Analysts		Employer (See instructions) UTSA
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tom Hoskins	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 12942 Legend Cave Dr San Antonio, TX 78230		
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self-employed
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David Prichard	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 10101 Reunion PI San Antonio, TX 78216		
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Self-employed

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:
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2 FILER NAME

Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/27/2024

5 Full name of contributor out-of-state PAC (ID# _____)
Rob McDaniel

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**20 Dominion Dr
San Antonio, TX 78256**

8 Principal occupation / Job title (See instructions)
Self-employed

9 Employer (See instructions)
Self-employed

Date
6/27/2024

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

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**3718 Pinebluff Dr
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Admin Assistant

Employer (See instructions)
COLFA

Date
6/27/2024

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

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**610 E Market #3302
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)
Senioer VP

Employer (See instructions)
Wells Communication

Date
6/27/2024

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

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**610 E Market #3302
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
Wells Communication

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date
6/27/2024

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

7 Amount of contribution (\$)
250.00

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

8 Principal occupation / Job title (See instructions)
President

9 Employer (See instructions)
Audi Dominion

Date
6/27/2024

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**13854 Bent Ridge Dr
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
6/27/2024

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

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Chief marketing officers

Employer (See instructions)
Morgans

Date
6/27/2024

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

Amount of contribution (\$)
100.00

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

Principal occupation / Job title (See instructions)
Self-employed

Employer (See instructions)
Self-employed

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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: 13 of 15
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Clare	7 Amount of contribution (\$) 50.00
6 Contributor address; City; State; Zip Code 3934 Pleasure Hill Dr San Antonio, TX 78229		
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Self-employed
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ronnie Sanders	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 118 Summertime Dr San Antonio, TX 78216		
Principal occupation / Job title (See instructions) Artist		Employer (See instructions) Artist
Date 6/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Worth	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 270 Terrell Rd San Antonio, TX 78209		
Principal occupation / Job title (See instructions) Chairman		Employer (See instructions) Worth & Associates
Date 6/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lance Aaron	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 25622 Lakota Winter San Antonio, TX 78261		
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) American Heritage LLC

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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: 14 of 15
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/28/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marian Dyer	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 6830 Bella Colina San Antonio, TX 78256		
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Self-employed
Date 6/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miguel Martinez	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 7615 N Songbird Ln San Antonio, TX 78229		
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 6/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jason Morrow	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 28215 Heritage Trl Boerne, TX 78015		
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
Date 6/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mercedes Medina	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 14102 Vistawood San Antonio, TX 78249		
Principal occupation / Job title (See instructions) Teacher		Employer (See instructions) SAISD



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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: 15 of 15
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 Date 6/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Calvin Finch	7 Amount of contribution (\$) 300.00
6 Contributor address; City; State; Zip Code 6926 Dorothy Louise San Antonio, TX 78229		
8 Principal occupation / Job title (See instructions) Self-employed		9 Employer (See instructions) Self-employed
Date 6/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Joe Soliz	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 8915 Datapoint Dr ##45B San Antonio, TX 78229		
Principal occupation / Job title (See instructions) Self-employed		Employer (See instructions) Self-employed
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)

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date 5/23/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mr Andrew Toscano	8 Amount of Contribution \$ 233.50
	7 Contributor address; City; State; Zip Code 846 Culebra San Antonio, TX 78201	9 In-kind contribution description Food and beverage for fundraiser
		<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)		

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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: 1 of 1
2 FILER NAME Manny Pelaez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) 7 Pledgor address; City; State; Zip Code	8 Amount of Pledge \$ 9 In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
10 Principal occupation / Job title (See instructions)		11 Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of Pledge \$ In-kind contribution description <input type="checkbox"/> Check if travel outside of Texas, complete Schedule T
Principal occupation / Job title (See instructions)		Employer (See instructions)

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

LOANS

SCHEDULE E

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

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By 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

1 Total pages Schedule F1: 1 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
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4 Date 2/28/2024	5 Payee name Broadway Bank
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6 Amount (\$) 2.00	7 Payee address; City; State; Zip Code 1177 NE Loop 410 San Antonio, TX 78209
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/4/2024	Payee name Texas Democratic Party
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Amount (\$) 2004.00	Payee address; City; State; Zip Code 1106 Lavaca St. #100 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Voter Data	Description Voter Data
	<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 4/8/2024	Payee name Constant Contact
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Amount (\$) 154.57	Payee address; City; State; Zip Code 3675 Precision Dr. Loveland, CA 80538
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Email program
	<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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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

1 Total pages Schedule F1: 2 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/12/2024	5 Payee name Manny Pelaez	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip Code 3522 Paesano Pkwy #301 San Antonio, TX 78231	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description Reimbursement on expense made with personal funds
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 4/23/2024	Payee name Viva Politics	
Amount (\$) 4500.00	Payee address; City; State; Zip Code 1850 Fredericksburg San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Consulting
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 4/23/2024	Payee name Herospace Digital Consulting LLC	
Amount (\$) 5812.50	Payee address; City; State; Zip Code 1840 W Mulberry Ave San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Digital Consulting
	<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

1 Total pages Schedule F1: 3 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/23/2024	5 Payee name Picture Box	
6 Amount (\$) 5700.00	7 Payee address; City; State; Zip Code 1023 Springdale Rd Bldg. 10, #C Austin, TX 78721	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Video production
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 4/24/2024	Payee name Manny Pelaez		
Amount (\$) 252.20	Payee address; City; State; Zip Code 3522 Paesano Pkwy San Antonio, TX 78231		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description Reimbursement on expense made with personal funds	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date 4/25/2024	Payee name Manny Pelaez		
Amount (\$) 1060.69	Payee address; City; State; Zip Code 3522 Paesano Pkwy San Antonio, TX 78231		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description Reimbursement on expense made with personal funds	
	<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

1 Total pages Schedule F1: 4 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/25/2024	5 Payee name Handwrytten	
6 Amount (\$) 4.43	7 Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date 4/25/2024	Payee name Domingo Restaurant		
Amount (\$) 92.40	Payee address; City; State; Zip Code 123 N St Marys St San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Lunch with donors	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

Date 4/26/2024	Payee name Woods of Shavano Community Assoc.		
Amount (\$) 1000.00	Payee address; City; State; Zip Code 13138 Parksite Woods St San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Sponsorship	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/26/2024	5 Payee name Yen Yan	
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 10999 IH10 W #175 San Antonio, TX 78230	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description Donation
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 5/1/2024	Payee name Cesar E. Chavez Legacy and Educational Foundation		
Amount (\$) 2000.00	Payee address; City; State; Zip Code 1504 E Commerce St, San Antonio, TX 78205		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Donation	
	<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 5/2/2024	Payee name Manny Pelaez		
Amount (\$) 17.72	Payee address; City; State; Zip Code 3522 Paesano Pkwy San Antonio, TX 78231		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description Reimbursement on expense made with personal funds	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name	Office sought	Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/6/2024	5 Payee name Nationbuilder	
6 Amount (\$) 104.00	7 Payee address; City; State; Zip Code 520 South Grand Ave. Los Angeles, CA 90071	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Website
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 5/6/2024	Payee name James Rodriguez	
Amount (\$) 750.00	Payee address; City; State; Zip Code 000 000 San Antonio, TX 78205	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Contract labor - security
	<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 5/7/2024	Payee name Constant Contact	
Amount (\$) 154.57	Payee address; City; State; Zip Code 3675 Precision Drive Loveland, CO 80538	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Email program
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/8/2024	5 Payee name Vista Print	
6 Amount (\$) 22.72	7 Payee address; City; State; Zip Code 275 Wymam St Waltham, MA 02451	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 5/13/2024	Payee name Extra Space		
Amount (\$) 212.00	Payee address; City; State; Zip Code 9738 Huebner Rd San Antonio, TX 78240		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Storage space	
	<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 5/13/2024	Payee name Wild Birds Unlimed		
Amount (\$) 132.00	Payee address; City; State; Zip Code 14602 Huebner Rd San Antnio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description Sister city gifts	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 8 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/15/2024	5 Payee name Facebook	
6 Amount (\$) 165.22	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Digital ads
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 5/17/2024	Payee name Handwrytten		
Amount (\$) 21.65	Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Cards	
	<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 5/22/2024	Payee name Taqueria Datapoint		
Amount (\$) 46.93	Payee address; City; State; Zip Code 4503 De Zavala Rd San Antonio, TX 78249		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Staff breakfast	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 9 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/24/2024	5 Payee name Backyard on Broadway	
6 Amount (\$) 16.49	7 Payee address; City; State; Zip Code 2411 Broadway San Antonio, TX 78215	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food and beverage at fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 5/24/2024	Payee name Uber Eats		
Amount (\$) 21.17	Payee address; City; State; Zip Code 1455 Market St #400 San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Staff lunch	
	<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 5/24/2024	Payee name Uber Eats		
Amount (\$) 151.23	Payee address; City; State; Zip Code 1455 Market St #400 San Francisco, CA 94103		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Staff lunch	
	<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

1 Total pages Schedule F1: 10 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/28/2024	5 Payee name Angkor Bistro	
6 Amount (\$) 88.08	7 Payee address; City; State; Zip Code 3111 TPC Pkwy San Antonio, TX 78259	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meeting with donor
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought
		Office held

Date 5/28/2024	Payee name Nationbuilder		
Amount (\$) 104.00	Payee address; City; State; Zip Code 520 South Grand Ave. Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Website	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

Date 5/28/2024	Payee name Broadway Bank		
Amount (\$) 3.00	Payee address; City; State; Zip Code 1177 NE Loop 410 San Antonio, TX 78209		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Accounting/Banking	Description Fee	
	<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

1 Total pages Schedule F1: 11 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/28/2024	5 Payee name Mi Tierra	
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 218 Produce Row San Antonio, TX 78207	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Donor lunch
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 5/28/2024	Payee name Hotel Emma		
Amount (\$) 88.78	Payee address; City; State; Zip Code 136 E Grayson St San Antonio, TX 78215		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Meeting with donor	
	<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 5/30/2024	Payee name Viva Politics		
Amount (\$) 8000.00	Payee address; City; State; Zip Code 1850 Fredericksburg San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Campaign management	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name	Office sought	Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 12 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/31/2024	5 Payee name Cates Legal Group PLLC	
6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 20210 Silver Stream San Antonio, TX 78259	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Legal Services	(b) Description Legal services
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 6/6/2024	Payee name Go Daddy	
Amount (\$) 44.34	Payee address; City; State; Zip Code 14455 North Hayden Rd Scottsdale, AZ 85260	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Web URL
	<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 6/6/2024	Payee name Panaderia Jimenez	
Amount (\$) 30.02	Payee address; City; State; Zip Code 1846 Fredericksburg Rd San Antonio, TX 78201	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Staff meeting
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 13 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 6/7/2024	5 Payee name Constant Contact	
6 Amount (\$) 154.57	7 Payee address; City; State; Zip Code 3675 Precision Drive Loveland, CO 80538	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description Email program
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 6/7/2024	Payee name Handwrytten		
Amount (\$) 4.43	Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Cards	
	<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 6/10/2024	Payee name Taqueria Datapoint		
Amount (\$) 28.12	Payee address; City; State; Zip Code 4503 De Zavala Rd San Antonio, TX 78249		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Staff meeting	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 14 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 6/12/2024	5 Payee name Total Wine	
6 Amount (\$) 319.34	7 Payee address; City; State; Zip Code 125 NW Loop 419 San Antonio, TX 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Food and beverage for fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 6/14/2024	Payee name Facebook		
Amount (\$) 213.24	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Digital ads	
	<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 6/18/2024	Payee name Extra Space		
Amount (\$) 252.20	Payee address; City; State; Zip Code 9738 Huebner Rd San Antonio, TX 78240		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense	Description Storage space	
	<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

1 Total pages Schedule F1: 15 of 15	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 6/24/2024	5 Payee name Taqueria Datapoint	
6 Amount (\$) 55.96	7 Payee address; City; State; Zip Code 4503 De Zavala Rd San Antonio, TX 78249	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Staff meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name	Office sought	Office held

Date 6/25/2024	Payee name Viva Strategy Group		
Amount (\$) 350.00	Payee address; City; State; Zip Code 3529 Eva Jane Rd San Antonio, TX 78261		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Consulting	
	<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 6/28/2024	Payee name Nationbuilder		
Amount (\$) 104.00	Payee address; City; State; Zip Code 520 South Grand Ave Los Angeles, CA 90071		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Website	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

1 Total pages Schedule F2: 1 of 1	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---------------------------------------------------------------------------

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

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

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

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

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

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

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

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking	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

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

5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
------------------------------	---------------------------------------------------------------------------

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

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

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
---------------------	---------------------------------------------------------------------------

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

1 Total pages Schedule G: 1 of 2	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 4/5/2024	5 Payee Name Young Womens Leadership Academy Foundation	
6 Amount (\$) 500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 155 Concord Plaza San Antonio, TX 78216	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political	(b) Description Donation for fundraiser
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 4/22/2024	Payee name Vista Print	
Amount (\$) 252.20 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 275 Wymam St Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Cards
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 4/22/2024	Payee name Vista Print	
Amount (\$) 1060.69 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 275 Wymam St Waltham, MA 02451	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Hats and printed materials
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM 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

1 Total pages Schedule G: 2 of 2	2 FILER NAME Manny Pelaez	3 Filer ID (Ethics Commission Filers)
4 Date 5/1/2024	5 Payee Name Handwrytten	
6 Amount (\$) 17.72 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 9820 S. Kyrene Rd Tempe, AZ 85284	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking 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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

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

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:
1 of 1

2 FILER NAME
Manny Pelaez

3 Filer ID (Ethics Commission Filers)

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1 of 1
2 FILER NAME Manny Pelaez		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
Manny Pelaez

Filer ID (Ethics Commission Filers)

SIGNATURE

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

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

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

A. CAMPAIGN FUNDS

Check only one:

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

B. ASSETS

Check only one:

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

Signature of Candidate

OFFICEHOLDER

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

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

Signature of Officeholder