

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.				1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 77
3 CANDIDATE / OFFICEHOLDER NAME <input type="checkbox"/> Change of Address	MS / MRS / MR	FIRST Ivalis	MI M	OFFICE USE ONLY Date Received 1/15/2025 3:03:09PM	
	NICKNAME	LAST Gonzalez	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 782094 San Antonio TX 78278				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (210)	PHONE NUMBER 598-9079	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Melanie	MI	Receipt #	Amount \$
	NICKNAME	LAST Tawil	SUFFIX	Date Processed 1/15/2025 3:03:09PM	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2 Davenport Lane San Antonio TX 78257				
8 CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 323-9382	EXTENSION		
9 REPORT TYPE	January 15: Semi-Annual				
10 PERIOD COVERED	Month Day Year 7/1/2024			Month Day Year THROUGH 12/31/2024	
11 ELECTION	ELECTION DATE Month Day Year 5/3/2025	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special Description _____			
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known) Council District 8	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Ivalis M Gonzalez		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)	\$ 600.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 33540.00
	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 32338.81
	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 23243.55
	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 <u>Ivalis M Gonzalez</u> this the <u>15th</u> day of <u>January</u> , 2025, 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 Ivalis M Gonzalez	20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 30540.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3000.00
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	\$ 31446.81
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	\$ 446.00
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 446.00
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	\$ 106.38

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 1 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 7/12/2024	5 Full name of contributor Juan Gutierrez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 5627 Timber Trace St San Antonio, TX 78250			City; State; Zip Code
8 Principal occupation / Job title (See instructions) HUD-approved housing Counselor		9 Employer (See instructions) Our Casas Resident Council Inc	
Date 7/15/2024	Full name of contributor Art Hall	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; PO Box 929 San Antonio, TX 78294			City; State; Zip Code
Principal occupation / Job title (See instructions) Vice President		Employer (See instructions) TCC	
Date 8/6/2024	Full name of contributor Rosey R. Abuabara	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 12621 Hunters Chase San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Homemaker		Employer (See instructions) Homemaker	
Date 8/15/2024	Full name of contributor Gordan Hartman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 5210 Thousand Oaks Drive #1318 San Antonio, TX 78233			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Morgans Wonderland	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 2 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 8/20/2024	5 Full name of contributor Zarathustra Haro	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 7762 Oakhill Park Dr San Antonio, TX 78249			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Real Estate		9 Employer (See instructions) Northmarq	
Date 8/22/2024	Full name of contributor Roger Caballero	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 6123 Sinclair Rd. San Antonio, TX 78222			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) Madonna Center	
Date 9/6/2024	Full name of contributor Lawerence Romo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 4811 Isaac Ryan San Antonio, TX 78253			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 9/6/2024	Full name of contributor Daniel Gibson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3510 Hunters Dew San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Software Engineer		Employer (See instructions) Accenture Federal Services	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: 3 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 9/10/2024	5 Full name of contributor Zuraya Tapia-Hadley	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 630 18th St S Arlington, VA 22202			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Government Affairs		9 Employer (See instructions) TelevisaUnivision	
Date 9/14/2024	Full name of contributor Benny Hilario	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 5743 Ascham Dr. San Antonio, TX 78228			City; State; Zip Code
Principal occupation / Job title (See instructions) Supervisor		Employer (See instructions) Fredericks AC	
Date 9/18/2024	Full name of contributor Kelli Epp	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7415 Quail Run Dr San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Patti Larsen Consulting	
Date 9/20/2024	Full name of contributor Dora Olivo	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2625 Alamo St Rosenberg, TX 77471			City; State; Zip Code
Principal occupation / Job title (See instructions) JP		Employer (See instructions) Fort Bend County	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 4 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 9/25/2024	5 Full name of contributor Sarah McLornan	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 115 Paloma Dr San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Homemaker		9 Employer (See instructions) Homemaker	
Date 9/26/2024	Full name of contributor Debbie Jennings	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2 Victory Grn San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) UT Health	
Date 9/26/2024	Full name of contributor Margaret Montemayor	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 2329 W Gramercy PI San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 9/26/2024	Full name of contributor David Garza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 439 W Gramercy PI San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 5 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 9/26/2024	5 Full name of contributor Jesse Zapata	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
	6 Contributor address; 7038 Washita Way San Antonio, TX 78256	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 9/26/2024	Full name of contributor Gilberto Ocañas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 7 Champions Run San Antonio, TX 78258	City; State; Zip Code	
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Ocañas Group	
Date 9/26/2024	Full name of contributor Adrian Dominguez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 2518 Fairfield Bend Dr San Antonio, TX 78231	City; State; Zip Code	
Principal occupation / Job title (See instructions) Sr. Project Manager		Employer (See instructions) HEB	
Date 9/26/2024	Full name of contributor Michelle Potter	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
	Contributor address; 5923 Woodridge Rock San Antonio, TX 78249	City; State; Zip Code	
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self Employed	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 6 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 9/26/2024	5 Full name of contributor Helen Coronado	<input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 100.00
	6 Contributor address; 2 Victory Grn San Antonio, TX 78257	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 9/27/2024	Full name of contributor Jordan Ghawi	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 100.00
	Contributor address; 903 W Huisache Ave San Antonio, TX 78201	City; State; Zip Code	
Principal occupation / Job title (See instructions) Healthcare		Employer (See instructions) STRAC	
Date 9/27/2024	Full name of contributor Charles Riley	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 200.00
	Contributor address; 312 Mission Street San Antonio, TX 78210	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Riley & Riley	
Date 9/27/2024	Full name of contributor Roger Arriaga	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 100.00
	Contributor address; 15023 Pastura Pass Helotes, TX 78023	City; State; Zip Code	
Principal occupation / Job title (See instructions) Executive Director		Employer (See instructions) Texas Affiliation of Affordable Housing Providers	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 7 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 9/28/2024	5 Full name of contributor Christian Archer	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
	6 Contributor address; 134 West Mistletoe Avenue San Antonio, TX 78212	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) Self Employed	
Date 10/2/2024	Full name of contributor Patricia Butler	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 12535 Elm Manor St San Antonio, TX 78230	City; State; Zip Code	
Principal occupation / Job title (See instructions) Realtor		Employer (See instructions) Realtor	
Date 10/3/2024	Full name of contributor Manuel Escobar	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
	Contributor address; 503 Bosque Vista San Antonio, TX 78258	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Davis Law Firm	
Date 10/4/2024	Full name of contributor Rose Reyes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 217 Carolwood Dr San Antonio, TX 78213	City; State; Zip Code	
Principal occupation / Job title (See instructions) President		Employer (See instructions) Giant Noise	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 8 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/10/2024	5 Full name of contributor Jeff Goldblatt	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 14 Stonewall Bend San Antonio, TX 78256			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Self employed		9 Employer (See instructions) Self Employed	
Date 10/11/2024	Full name of contributor Gloria Hernandez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 13709 Tajamar Corpus Christi, TX 78414			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/14/2024	Full name of contributor Maureen Gonima	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 401 Adam St San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) iHeartMedia	
Date 10/15/2024	Full name of contributor Acenete Flores	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 7514 Greenbelt Street San Antonio, TX 78251			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 9 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/15/2024	5 Full name of contributor Ana Luisa Galindo	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 1811 Cassandra St San Antonio, TX 78224			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Secretary		9 Employer (See instructions) Government	
Date 10/16/2024	Full name of contributor Margaret Mireles	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 329 Mary Louise DR San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/17/2024	Full name of contributor Natalie Gamez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 4 Montique Ct. San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) Student		Employer (See instructions) Student	
Date 10/17/2024	Full name of contributor Anamaria Suescun-Fast	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 360 Pike Road San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Communications		Employer (See instructions) talkStrategy	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 10 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/17/2024	5 Full name of contributor Martha Martinez-Flores	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 300.00
6 Contributor address; 319 West Kings Highway San Antonio, TX 78212			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Creative Director		9 Employer (See instructions) MM Creative LLC	
Date 10/17/2024	Full name of contributor Rebecca Rodriguez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
Contributor address; 306 Wood Shadow San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Marketing		Employer (See instructions) Whataburger Restaurants	
Date 10/17/2024	Full name of contributor Annelise Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 24719 Buck Creek San Antonio, TX 78255			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/17/2024	Full name of contributor Rogelio Saenz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 226 Garfield Aly San Antonio, TX 78207			City; State; Zip Code
Principal occupation / Job title (See instructions) Professor		Employer (See instructions) University of Texas at San Antonio	
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

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 11 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2024	5 Full name of contributor Carolina Bilano	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 6227 Cypress Circle San Antonio, TX 78240			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Student		9 Employer (See instructions) Student	
Date 10/18/2024	Full name of contributor Sarah Martinez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 723 E Drexel Ave San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/18/2024	Full name of contributor Jeanne Russell	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 639 Mission Street San Antonio, TX 78210			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive Director		Employer (See instructions) CAST Schools	
Date 10/18/2024	Full name of contributor Cecilia Herrera	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 105 Blackhawk Trail San Antonio, TX 78232			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 12 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/18/2024	5 Full name of contributor Joe Gamez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 2943 Mossrock San Antonio, TX 78230			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Gamez Law Firm	
Date 10/18/2024	Full name of contributor Elva Esparza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 400.00
Contributor address; 6127 Opal Falls San Antonio, TX 78222			City; State; Zip Code
Principal occupation / Job title (See instructions) Court Manager		Employer (See instructions) Bexar County	
Date 10/18/2024	Full name of contributor Ramon Esparza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 400.00
Contributor address; 6127 Opal Falls San Antonio, TX 78222			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/19/2024	Full name of contributor Rosemarie Dehoyos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 6082 Crab Orchard San Antonio, TX 78240			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 13 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/19/2024	5 Full name of contributor Gloria Mayo-Moreno	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 730 Babcock Rd #1104 San Antonio, TX 78201			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 10/19/2024	Full name of contributor Barbara Aguirre	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 659 Aurora Ave San Antonio, TX 78228			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/19/2024	Full name of contributor Kathleen Vale	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 343 Springwood Ln San Antonio, TX 78216			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/19/2024	Full name of contributor Della Moore	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 3915 Fawnridge Dr San Antonio, TX 78229			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 14 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/19/2024	5 Full name of contributor Norma Reyes	<input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 348 Alexander Hamilton Dr San Antonio, TX 78228			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 10/19/2024	Full name of contributor Rose Gonzalez	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 30.00
Contributor address; 1101 W.Huisache Ave. San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 10/19/2024	Full name of contributor Elizabeth Fauerso	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 100.00
Contributor address; 216 Carolwood Dr San Antonio, TX 78213			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) EBF	
Date 10/19/2024	Full name of contributor Lisa Andrade Gonima	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 100.00
Contributor address; 222 West Mulberry Ave San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Del Rey Transportation LLC	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 15 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/19/2024	5 Full name of contributor Debbie Martinez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 26034 Hazy Hollow Drive San Antonio, TX 78255			City; State; Zip Code
8 Principal occupation / Job title (See instructions) PA-c		9 Employer (See instructions) SFP	
Date 10/19/2024	Full name of contributor Ayse Derman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 14319 Hill Prince San Antonio, TX 78248			City; State; Zip Code
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Niche	
Date 10/19/2024	Full name of contributor Elizabeth Flores	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 8623 Shady MTN San Antonio, TX 78254			City; State; Zip Code
Principal occupation / Job title (See instructions) Realtor		Employer (See instructions) Self Employed	
Date 10/19/2024	Full name of contributor Claudia Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 103 Squires Row San Antonio, TX 78213			City; State; Zip Code
Principal occupation / Job title (See instructions) Marketing		Employer (See instructions) Silver Ventures	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 16 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/19/2024	5 Full name of contributor Virginia Sandoval	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
	6 Contributor address; 6963 Willow Oak Street San Antonio, TX 78249	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Scrum Master		9 Employer (See instructions) USAA	
Date 10/20/2024	Full name of contributor Lisa Navarro-Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 132 W Elmview PI San Antonio, TX 78209	City; State; Zip Code	
Principal occupation / Job title (See instructions) Vice President		Employer (See instructions) Santana Consulting Group	
Date 10/20/2024	Full name of contributor Sylvia Reyna	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
	Contributor address; 6021 Mike Nesmith Dr San Antonio, TX 78238	City; State; Zip Code	
Principal occupation / Job title (See instructions) President		Employer (See instructions) Incarnate Word Highschool	
Date 10/22/2024	Full name of contributor Larry Matthew Pouttu	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 9213 Powhatan Drive San Antonio, TX 78230	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 17 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/23/2024	5 Full name of contributor Melanie Mendez-Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 410 E. Rampart Dr San Antonio, TX 78216			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Managing Partner		9 Employer (See instructions) MMG Media	
Date 10/23/2024	Full name of contributor Alex Nava	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 522 Possum Oak Shavano Park, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) ANG PLLC	
Date 10/23/2024	Full name of contributor Adriana El-Farrah	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 4330 Diamondhead Drive San Antonio, TX 78218			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Adriana El-Farrah	
Date 10/29/2024	Full name of contributor Abida Parveen	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 13538 Barsan Rd. San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) President		Employer (See instructions) Leal Food Mart Inc	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 18 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 10/31/2024	5 Full name of contributor Joe Meza	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 4334 Shavano Woods San Antonio, TX 78249			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 11/7/2024	Full name of contributor Maria Berriozabal	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 1148 W. Russell Pl. San Antonio, TX 78201			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 11/9/2024	Full name of contributor Anita Medina	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 8323 Magdalena Run Helotes, TX 78023			City; State; Zip Code
Principal occupation / Job title (See instructions) Litigation Coordinator		Employer (See instructions) SAISD	
Date 11/9/2024	Full name of contributor Laura Hernandez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 7309 Aemilian Way Austin, TX 78730			City; State; Zip Code
Principal occupation / Job title (See instructions) Self employed		Employer (See instructions) Pescador Public Strategies	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 19 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 11/9/2024	5 Full name of contributor Virginia Sandoval	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 50.00
	6 Contributor address; 6963 Willow Oak Street San Antonio, TX 78249	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Scrum Master		9 Employer (See instructions) USAA	
Date 11/9/2024	Full name of contributor Timothy Carrasco	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
	Contributor address; 6963 Willow Oak Drive San Antonio, TX 78249	City; State; Zip Code	
Principal occupation / Job title (See instructions) Part time teacher		Employer (See instructions) SAISD	
Date 11/10/2024	Full name of contributor Hilda Levine	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 4406 Black Walnut Woods San Antonio, TX 78249	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 11/10/2024	Full name of contributor Robert Perez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 4823 Rollingfield Dr. San Antonio, TX 78228	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 20 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 11/10/2024	5 Full name of contributor Grace Gonzalez	<input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 218 Meadow Bend Dr. San Antonio, TX 78227			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 11/10/2024	Full name of contributor Catherine Torres-Stahl	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 250.00
Contributor address; 21715 Chancer Hill San Antonio, TX 78256			City; State; Zip Code
Principal occupation / Job title (See instructions) Judge		Employer (See instructions) Bexar County	
Date 11/10/2024	Full name of contributor David Saldana	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 100.00
Contributor address; 4014 Big Meadows San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self Employed	
Date 11/11/2024	Full name of contributor Elidia Henke	<input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$) 50.00
Contributor address; 14215 Parksite Woods San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 21 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 11/11/2024	5 Full name of contributor Jamie Lewis	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 7402 Round Mtn San Antonio, TX 78255			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 11/13/2024	Full name of contributor Lori Logan	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 3510 Hunters Sound St San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 11/13/2024	Full name of contributor Sonia Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 5910 Wales San Antonio, TX 78223			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Linebarger	
Date 11/16/2024	Full name of contributor Rosemarie Dehoyos	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 6082 Crab Orchard San Antonio, TX 78240			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 22 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 11/16/2024	5 Full name of contributor Luther Milton	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 13114 Hunters Valley St San Antonio, TX 78230			City; State; Zip Code
8 Principal occupation / Job title (See instructions) retired		9 Employer (See instructions) retired	
Date 11/18/2024	Full name of contributor Irene Hays-Pierce	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 13143 Hunters Spring St San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired	
Date 11/18/2024	Full name of contributor Vanessa Alaniz	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3110 Apache Plume San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Circle K	
Date 11/18/2024	Full name of contributor Ken Nirenberg	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 12726 Cranes Mill San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 23 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 11/18/2024	5 Full name of contributor Yvonne Murray	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 13830 Hunters Hawk St. San Antonio, TX 78230			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 11/18/2024	Full name of contributor Virginia Sandoval	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 6963 Willow Oak Street San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Scrum Master		Employer (See instructions) USAA	
Date 11/19/2024	Full name of contributor Joyce Townsend	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 15662 Robin Ridge San Antonio, TX 78248			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 12/2/2024	Full name of contributor Meg Domas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 25.00
Contributor address; 19307 Atoko Way San Antonio, TX 78256			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 24 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/2/2024	5 Full name of contributor Jeffrey Wolfe	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 150.00
6 Contributor address; 3568 Red Oak Ln San Antonio, TX 78230			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 12/7/2024	Full name of contributor Zoila Mejia	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 13118 Neumann Cove San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Realtor		Employer (See instructions) Self employed	
Date 12/10/2024	Full name of contributor David Canales Campaign	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; PO Box 592055 San Antonio, TX 78259			City; State; Zip Code
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 12/10/2024	Full name of contributor Gerald W. Lee	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 8127 New Braunfels #801 San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Andrade- Van de Putte	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 25 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/10/2024	5 Full name of contributor Daniel Kellum Jr.	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
	6 Contributor address; 330 E Summit Ave San Antonio, TX 78212	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Physician		9 Employer (See instructions) Self employed	
Date 12/11/2024	Full name of contributor Lukin Gilliland	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 901 NE Loop 410 #909 San Antonio, TX 78209	City; State; Zip Code	
Principal occupation / Job title (See instructions) Investor		Employer (See instructions) Self employed	
Date 12/11/2024	Full name of contributor Cecilia Canales	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; PO Box 592055 San Antonio, TX 78259	City; State; Zip Code	
Principal occupation / Job title (See instructions) Firm Administrator		Employer (See instructions) David Canales PLLC	
Date 12/11/2024	Full name of contributor David Canales	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 400.00
	Contributor address; PO Box 592055 San Antonio, TX 78259	City; State; Zip Code	
Principal occupation / Job title (See instructions) Lawyer/Former State District Judge		Employer (See instructions) David Canales PLLC	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 26 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/11/2024	5 Full name of contributor Barbara Taylor	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 107 Crofton Ave San Antonio, TX 78210			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Physician		9 Employer (See instructions) UT Health San Antonio	
Date 12/11/2024	Full name of contributor Rashid Atique	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 25843 Scenic Rock San Antonio, TX 78255			City; State; Zip Code
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Dominion Family Healthcare	
Date 12/12/2024	Full name of contributor Shirley Gonzales	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 1 Molas Dr. Durango, CO 81301			City; State; Zip Code
Principal occupation / Job title (See instructions) Business Owner		Employer (See instructions) Self employed	
Date 12/12/2024	Full name of contributor Eloise Gonzales	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 1 Molas Dr. Durango, CO 81301			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 27 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/12/2024	5 Full name of contributor Heriberto Guerra	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
	6 Contributor address; 1 Lone Star Pass San Antonio, TX 78264	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Business Owner		9 Employer (See instructions) Self employed	
Date 12/14/2024	Full name of contributor Pat Frost	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 520 Geneseo Road San Antonio, TX 78209	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 12/14/2024	Full name of contributor John Montford	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 1 Buckingham CT San Antonio, TX 78257	City; State; Zip Code	
Principal occupation / Job title (See instructions) Self employed		Employer (See instructions) Self Employed	
Date 12/17/2024	Full name of contributor Daniel Meza	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 13707 Cape Bluff San Antonio, TX 78216	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 28 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/17/2024	5 Full name of contributor Matthew Starr	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
	6 Contributor address; 7334 Blanco Rd #200 San Antonio, TX 78216	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) President		9 Employer (See instructions) Foresight Asset Management	
Date 12/17/2024	Full name of contributor Celina Peña	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 150.00
	Contributor address; 317 Newburn Drive Pittsburgh, PA 15216	City; State; Zip Code	
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Intend	
Date 12/17/2024	Full name of contributor Brown and McDonald PLLC	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 100 NE Loop 410 #1385 San Antonio, TX 78216	City; State; Zip Code	
Principal occupation / Job title (See instructions)		Employer (See instructions)	
Date 12/18/2024	Full name of contributor George Salinas	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
	Contributor address; 214 Blackjack Oak Shavano Park, TX 78230	City; State; Zip Code	
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) George Salinas Injury Lawyers	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 29 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/19/2024	5 Full name of contributor Raul Lomeli-Azoubel	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
6 Contributor address; 3318 Sable Creek San Antonio, TX 78259			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Chairman		9 Employer (See instructions) Welcome Tech Inc	
Date 12/23/2024	Full name of contributor Ivan Jaime	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 3830 Balentine San Antonio, TX 78257			City; State; Zip Code
Principal occupation / Job title (See instructions) Government Relations		Employer (See instructions) Walmart	
Date 12/25/2024	Full name of contributor Robert Greenblum	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 11221 Empire Ln Rockville, MD 20852			City; State; Zip Code
Principal occupation / Job title (See instructions) Consultant		Employer (See instructions) Self employed	
Date 12/25/2024	Full name of contributor Sara Villarreal	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 175.00
Contributor address; 2733 35th Street Northwest Washington, DC 20007			City; State; Zip Code
Principal occupation / Job title (See instructions) Executive		Employer (See instructions) Great Springs Project	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 30 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/26/2024	5 Full name of contributor Andrea Figueroa	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 100.00
6 Contributor address; 6622 Moss Oak Dr San Antonio, TX 78229			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Director of Youth Success		9 Employer (See instructions) San Antonio Area Foundation	
Date 12/27/2024	Full name of contributor David Zammiello	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 9721 Mandalay Way Helotes, TX 78023			City; State; Zip Code
Principal occupation / Job title (See instructions) Business Consultant		Employer (See instructions) DAZA Consulting	
Date 12/28/2024	Full name of contributor Marjorie Lucey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 20.00
Contributor address; 12835 Castle Bend Street San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 12/28/2024	Full name of contributor Ivalis Gonzalez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 12402 King Walnut San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Associate		Employer (See instructions) AVDP & Assoc	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 31 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/28/2024	5 Full name of contributor Paul Ruiz	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 200.00
6 Contributor address; 634 Spacious Sky San Antonio, TX 78260			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired	
Date 12/29/2024	Full name of contributor Jonathan Starr	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 3226 Spider Lily San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Lawyer		Employer (See instructions) RPSA law	
Date 12/30/2024	Full name of contributor Sukhdeep Kaur	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 814 W Craig PI San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) EDreimagined	
Date 12/30/2024	Full name of contributor Eugene Rodriguez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 500.00
Contributor address; 6410 View Point San Antonio, TX 78229			City; State; Zip Code
Principal occupation / Job title (See instructions) Council Aide		Employer (See instructions) Government	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 32 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/30/2024	5 Full name of contributor Grant Jacobson	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 250.00
6 Contributor address; 124 Edgewood PI San Antonio, TX 78209			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Consultant		9 Employer (See instructions) Momentum Advisory Services	
Date 12/30/2024	Full name of contributor Kazim Fahim	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 409 E Olmos Drive San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Associate Creative Director		Employer (See instructions) Chamoy Creative	
Date 12/30/2024	Full name of contributor Cha Guzman	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 7 Champions Run San Antonio, TX 78258			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 12/31/2024	Full name of contributor Peggy Peterson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 3006 King Maple San Antonio, TX 78230			City; State; Zip Code
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 33 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024	5 Full name of contributor Leticia Van de Putte	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 500.00
	6 Contributor address; 222 Herweck Dr San Antonio, TX 78213	City; State; Zip Code	
8 Principal occupation / Job title (See instructions) Pres/CEO		9 Employer (See instructions) Andrade-VandePutte	
Date 12/31/2024	Full name of contributor Sandy Hughey	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
	Contributor address; 3430 Hunters Stand St San Antonio, TX 78230	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 12/31/2024	Full name of contributor Howard Watkins	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 15.00
	Contributor address; 964 Palo Verde Avenue Long Beach, CA 90815	City; State; Zip Code	
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired	
Date 12/31/2024	Full name of contributor Michael Kennick	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
	Contributor address; 8323 Magdalena Run Helotes, TX 78023	City; State; Zip Code	
Principal occupation / Job title (See instructions) Electronics Engineer		Employer (See instructions) United States Air Force	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 34 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024	5 Full name of contributor Paul Stahl	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 150.00
6 Contributor address; 21715 Chaucer Hill San Antonio, TX 78256			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Vice President of Business Development		9 Employer (See instructions) Dyna Touch	
Date 12/31/2024	Full name of contributor JoNeen Serna	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 11226 Rose Canyon Helotes, TX 78023			City; State; Zip Code
Principal occupation / Job title (See instructions) Director of Philanthropy		Employer (See instructions) Christus Health	
Date 12/31/2024	Full name of contributor John Dickson	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 100.00
Contributor address; 134 Park Hill Dr San Antonio, TX 78212			City; State; Zip Code
Principal occupation / Job title (See instructions) Security Consultant		Employer (See instructions) Bytewhisper Security	
Date 12/31/2024	Full name of contributor Javier Paredes	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 250.00
Contributor address; 2603 Country Square St San Antonio, TX 78209			City; State; Zip Code
Principal occupation / Job title (See instructions) Architect		Employer (See instructions) StudioMassivo	
<p style="text-align: center;">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>			1 Total pages Schedule A1: 35 of 35
2 FILER NAME Ivalis M Gonzalez			3 Filer ID (Ethics Commission Filers)
4 Date 12/31/2024	5 Full name of contributor Jeffrie Lewis	<input type="checkbox"/> out-of-state PAC (ID#_____)	7 Amount of contribution (\$) 25.00
6 Contributor address; 13502 Bay Orchard Dr San Antonio, TX 78231			City; State; Zip Code
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Zachary Group	
Date 12/31/2024	Full name of contributor Belinda Benavidez	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 200.00
Contributor address; 7310 Centerfield Rd San Antonio, TX 78240			City; State; Zip Code
Principal occupation / Job title (See instructions) Director		Employer (See instructions) American Cancer Society	
Date 12/31/2024	Full name of contributor Virginia Sandoval	<input type="checkbox"/> out-of-state PAC (ID#_____)	Amount of contribution (\$) 50.00
Contributor address; 6963 Willow Oak Street San Antonio, TX 78249			City; State; Zip Code
Principal occupation / Job title (See instructions) Scrum Master		Employer (See instructions) Usa	
Date 12/31/2024	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

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: 1 of 3</p>
<p>2 FILER NAME Ivalis M Gonzalez</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$ 0</p>
<p>5 Date 9/26/2024</p>	<p>6 Full name of contributor Maximilian Navarro</p> <p>7 Contributor address; City; State; Zip Code 23207 Linwood Ridge San Antonio, TX 78255</p>	<p>8 Amount of Contribution \$ 500.00</p> <p>9 In-kind contribution description Food for fundraisers</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date 9/26/2024</p>	<p>Full name of contributor Victoria Herrera</p> <p>Contributor address; City; State; Zip Code 1800 W Commerce St San Antonio, TX 78207</p>	<p>Amount of Contribution \$ 500.00</p> <p>In-kind contribution description Food for fundraiser</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: 2 of 3</p>
<p>2 FILER NAME Ivalis M Gonzalez</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>
<p>5 Date 10/19/2024</p>	<p>6 Full name of contributor Arizona Cafe</p> <p>7 Contributor address; City; State; Zip Code 1111 S General McMullen Dr San Antonio, TX 78237</p>	<p>8 Amount of Contribution \$ 500.00</p> <p>9 In-kind contribution description Food for fundraiser</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date 10/19/2024</p>	<p>Full name of contributor EBF Development and Design Studio</p> <p>Contributor address; City; State; Zip Code 216 Carolwood Dr San Antonio, TX 78213</p>	<p>Amount of Contribution \$ 500.00</p> <p>In-kind contribution description Food for fundraiser</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule A2: 3 of 3</p>
<p>2 FILER NAME Ivalis M Gonzalez</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS</p>		<p>\$</p>
<p>5 Date 11/19/2024</p>	<p>6 Full name of contributor Brendon Robinson</p> <p>7 Contributor address; 1803 S Presa San Antonio, TX 78210</p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>8 Amount of Contribution \$ 500.00</p> <p>9 In-kind contribution description Labor</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>11 Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>12 Contributor's principal occupation (FOR JUDICIAL)</p>		<p>13 Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>14 Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>Date 11/19/2024</p>	<p>Full name of contributor Anthony Cruz</p> <p>Contributor address; 1844 Fredericksburg San Antonio, TX 78201</p>	<p><input type="checkbox"/> out-of-state PAC (ID#_____)</p> <p>Amount of Contribution \$ 500.00</p> <p>In-kind contribution description Labor</p> <p><input type="checkbox"/> Check if travel outside of Texas, complete Schedule T</p>
<p>Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)</p>		<p>Employer (FOR NON-JUDICIAL) (See instructions)</p>
<p>Contributor's principal occupation (FOR JUDICIAL)</p>		<p>Contributor's job title (FOR JUDICIAL) (See instructions)</p>
<p>Contributor's employer/law firm (FOR JUDICIAL)</p>		<p>Law firm of contributor's spouse (if any) (FOR JUDICIAL)</p>
<p>If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)</p>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

PLEDGED CONTRIBUTIONS

SCHEDULE B

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1 of 1
2 FILER NAME Ivalis M Gonzalez		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 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
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 Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
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 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 7/1/2024	5 Payee name Mailchimp		
6 Amount (\$) 21.32	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Eblast subscription	
	(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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 7/15/2024	Payee name Ivalis M Gonzalez		
Amount (\$) 250.00	Payee address; PO Box 782094 San Antonio, TX 78278		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description Reimbursement of expense using 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 7/15/2024	Payee name Ivalis M Gonzalez		
Amount (\$) 920.00	Payee address; PO Box 782094 San Antonio, TX 78278		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Loan Repayment/Reimbursement		Description Reimbursement of expense using 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
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 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 7/18/2024	5 Payee name Gonzales Wolff Business Solutions		
6 Amount (\$) 1000.00	7 Payee address; City; State; Zip Code 1712 Buena Vista San Antonio, TX 78207		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting	
	(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 7/29/2024	Payee name Go Daddy.com		
Amount (\$) 127.79	Payee address; City; State; Zip Code 2150 E Warner Rd Tempe, AZ 85284		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description 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 7/29/2024	Payee name Mailchimp		
Amount (\$) 125.26	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Eblast subscription	
	<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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A

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: 3 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)														
4 Date 7/31/2024	5 Payee name Anedot															
6 Amount (\$) 4.30	7 Payee address; City; State; Zip Code 1201 W Peachtree St NW Atlanta, GA 30309															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Credit card processing fees														
	(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													
<table border="1"> <tr> <td>Date 8/1/2024</td> <td>Payee name Walmart</td> </tr> <tr> <td>Amount (\$) 14.35</td> <td>Payee address; City; State; Zip Code 3302 SE Military Dr San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Other: Cards</td> <td>Description Thank you cards</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 8/1/2024	Payee name Walmart	Amount (\$) 14.35	Payee address; City; State; Zip Code 3302 SE Military Dr San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Cards	Description Thank you 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 8/1/2024	Payee name Walmart															
Amount (\$) 14.35	Payee address; City; State; Zip Code 3302 SE Military Dr San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Cards	Description Thank you 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													
<table border="1"> <tr> <td>Date 8/1/2024</td> <td>Payee name Jared Ozuna</td> </tr> <tr> <td>Amount (\$) 250.00</td> <td>Payee address; City; State; Zip Code 1816 Aspen Silver San Antonio, TX 78245</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description Photography</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 8/1/2024	Payee name Jared Ozuna	Amount (\$) 250.00	Payee address; City; State; Zip Code 1816 Aspen Silver San Antonio, TX 78245	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Photography	<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 8/1/2024	Payee name Jared Ozuna															
Amount (\$) 250.00	Payee address; City; State; Zip Code 1816 Aspen Silver San Antonio, TX 78245															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Photography														
	<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: 4 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)														
4 Date 8/5/2024	5 Payee name Flagship Campaigns															
6 Amount (\$) 150.00	7 Payee address; 7926 Broadway #707 San Antonio, TX 78209	City; State; Zip Code														
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Data consulting														
	(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													
<table border="1"> <tr> <td>Date 8/7/2024</td> <td>Payee name Abuelas Mexican Restaurant</td> </tr> <tr> <td>Amount (\$) 30.73</td> <td>Payee address; 2313 NW Military Hwy San Antonio, TX 78230</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Food/Beverage Expense</td> <td>Description Donor meeting</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 8/7/2024	Payee name Abuelas Mexican Restaurant	Amount (\$) 30.73	Payee address; 2313 NW Military Hwy San Antonio, TX 78230	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Donor 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
Date 8/7/2024	Payee name Abuelas Mexican Restaurant															
Amount (\$) 30.73	Payee address; 2313 NW Military Hwy San Antonio, TX 78230															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Donor 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													
<table border="1"> <tr> <td>Date 8/15/2024</td> <td>Payee name Roger Caballero</td> </tr> <tr> <td>Amount (\$) 500.00</td> <td>Payee address; 6123 Sinclair Rd. San Antonio, TX 78222</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Other: Refund contribution</td> <td>Description Refund contribution</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 8/15/2024	Payee name Roger Caballero	Amount (\$) 500.00	Payee address; 6123 Sinclair Rd. San Antonio, TX 78222	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Refund contribution	Description Refund contribution	<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 8/15/2024	Payee name Roger Caballero															
Amount (\$) 500.00	Payee address; 6123 Sinclair Rd. San Antonio, TX 78222															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Refund contribution	Description Refund contribution														
	<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: 5 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)														
4 Date 8/21/2024	5 Payee name Prestige Printing															
6 Amount (\$) 218.67	7 Payee address; City; State; Zip Code 16 Burwood Lane San Antonio, TX 78216															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Business 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													
<table border="1"> <tr> <td>Date 8/21/2024</td> <td>Payee name Jennifer Longoria</td> </tr> <tr> <td>Amount (\$) 1750.00</td> <td>Payee address; City; State; Zip Code 403 Basswood San Antonio, TX 78213</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Consulting Expense</td> <td>Description Data consulting</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 8/21/2024	Payee name Jennifer Longoria	Amount (\$) 1750.00	Payee address; City; State; Zip Code 403 Basswood San Antonio, TX 78213	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Data 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 8/21/2024	Payee name Jennifer Longoria															
Amount (\$) 1750.00	Payee address; City; State; Zip Code 403 Basswood San Antonio, TX 78213															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description Data 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													
<table border="1"> <tr> <td>Date 8/22/2024</td> <td>Payee name VIVA Politics</td> </tr> <tr> <td>Amount (\$) 9000.00</td> <td>Payee address; City; State; Zip Code 1850 Fredericksburg Rd San Antonio, TX 78201</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Consulting Expense</td> <td>Description Consulting</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 8/22/2024	Payee name VIVA Politics	Amount (\$) 9000.00	Payee address; City; State; Zip Code 1850 Fredericksburg Rd San Antonio, TX 78201	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description 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 8/22/2024	Payee name VIVA Politics															
Amount (\$) 9000.00	Payee address; City; State; Zip Code 1850 Fredericksburg Rd San Antonio, TX 78201															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description 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													
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: 6 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)
4 Date 8/28/2024	5 Payee name Harland Clarke	
6 Amount (\$) 34.30	7 Payee address; City; State; Zip Code 5800 Northwest Pkwy San Antonio, TX 78249	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking	(b) Description Checks
	(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 Ivalis M Gonzalez	Office sought Office held
Date 8/29/2024	Payee name Mailchimp	
Amount (\$) 125.26	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Eblast subscription
	<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 Ivalis Gonzalez	Office sought Office held Council District 8 N/A
Date 8/31/2024	Payee name Anedot	
Amount (\$) 10.30	Payee address; City; State; Zip Code 1201 W Peachtree St NW Atlanta, GA 30309	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Credit card processing fees
	<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: 7 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 9/5/2024	5 Payee name Gary Joeris		
6 Amount (\$) 500.00	7 Payee address; PO Box 790086 San Antonio, TX 78279	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Refund Contribution	(b) Description Refund Contribution	
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 9/6/2024	Payee name Alamo Mailing		
Amount (\$) 1756.63	Payee address; 13114 Lookout Run San Antoni, TX 78233	City; State; Zip Code	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Mailing	
	<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 9/12/2024	Payee name Hunters Creek Swim & Rec Center		
Amount (\$) 100.00	Payee address; 3630 Hunters Cir St San Antonio, TX 78230	City; State; Zip Code	
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Room rental 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
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: 8 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)														
4 Date 9/12/2024	5 Payee name Hunters Creek Swim & Rec Center															
6 Amount (\$) 150.00	7 Payee address; City; State; Zip Code 3630 Hunters Cir St San Antonio, TX 78230															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Room rental 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													
<table border="1"> <tr> <td>Date 9/19/2024</td> <td>Payee name Hunters Creek Swim & Rec Center</td> </tr> <tr> <td>Amount (\$) 100.00</td> <td>Payee address; City; State; Zip Code 3630 Hunters Cir St San Antonio, TX 78230</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Event Expense</td> <td>Description Deposit for room rental</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 9/19/2024	Payee name Hunters Creek Swim & Rec Center	Amount (\$) 100.00	Payee address; City; State; Zip Code 3630 Hunters Cir St San Antonio, TX 78230	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Deposit for room rental	<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 9/19/2024	Payee name Hunters Creek Swim & Rec Center															
Amount (\$) 100.00	Payee address; City; State; Zip Code 3630 Hunters Cir St San Antonio, TX 78230															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Deposit for room rental														
	<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													
<table border="1"> <tr> <td>Date 9/30/2024</td> <td>Payee name Sams Club</td> </tr> <tr> <td>Amount (\$) 58.72</td> <td>Payee address; City; State; Zip Code 5055 Northwest Loop 410 San Antonio, TX 78229</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Event Expense</td> <td>Description Cookies</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 9/30/2024	Payee name Sams Club	Amount (\$) 58.72	Payee address; City; State; Zip Code 5055 Northwest Loop 410 San Antonio, TX 78229	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Cookies	<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 9/30/2024	Payee name Sams Club															
Amount (\$) 58.72	Payee address; City; State; Zip Code 5055 Northwest Loop 410 San Antonio, TX 78229															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Cookies														
	<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: 9 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 9/30/2024	5 Payee name Anedot		
6 Amount (\$) 95.90	7 Payee address; City; State; Zip Code 1201 W Peachtree St NW Atlanta, GA 30309		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description Credit card processing fees	
	(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 Ivalis M Gonzalez	Office sought Council District 8	Office held N/A
Date 9/30/2024	Payee name Mailchimp		
Amount (\$) 125.26	Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Eblast subscription	
	<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 Ivalis M Gonzalez	Office sought Council District 8	Office held N/A
Date 10/4/2024	Payee name VIVA Politics		
Amount (\$) 3500.00	Payee address; City; State; Zip Code 1850 Fredericksburg Rd San Antonio, TX 78201		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description 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 Ivalis M Gonzalez	Office sought Council District 8	Office held N/A
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 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)														
4 Date 10/7/2024	5 Payee name Prestige Printing															
6 Amount (\$) 1135.54	7 Payee address; City; State; Zip Code 16 Burwood Lane San Antonio, TX 78216															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description Mailer														
	(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													
<table border="1"> <tr> <td>Date 10/10/2024</td> <td>Payee name JVC Media</td> </tr> <tr> <td>Amount (\$) 2706.25</td> <td>Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description Signs</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 10/10/2024	Payee name JVC Media	Amount (\$) 2706.25	Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Signs	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 10/10/2024	Payee name JVC Media															
Amount (\$) 2706.25	Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Signs														
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense															
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held													
<table border="1"> <tr> <td>Date 10/15/2024</td> <td>Payee name Go Daddy.com</td> </tr> <tr> <td>Amount (\$) 27.34</td> <td>Payee address; City; State; Zip Code 2150 E Warner Rd Tempe, AZ 85284</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Advertising Expense</td> <td>Description URL</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 10/15/2024	Payee name Go Daddy.com	Amount (\$) 27.34	Payee address; City; State; Zip Code 2150 E Warner Rd Tempe, AZ 85284	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description 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 10/15/2024	Payee name Go Daddy.com															
Amount (\$) 27.34	Payee address; City; State; Zip Code 2150 E Warner Rd Tempe, AZ 85284															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description 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													
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: 11 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)
4 Date 10/25/2024	5 Payee name Broadway Daily Bread	
6 Amount (\$) 5.33	7 Payee address; City; State; Zip Code 5001 Broadway San Antonio, TX 78209	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Coffee
	(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 Ivalis M Gonzalez	Office sought Office held

Date 10/28/2024	Payee name Facebook	
Amount (\$) 2.00	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) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Office held Council District 8 N/A

Date 10/28/2024	Payee name Facebook	
Amount (\$) 2.00	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) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Office held Council District 8 N/A

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: 12 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/2024	5 Payee name Facebook		
6 Amount (\$) 2.00	7 Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 10/28/2024	Payee name Facebook		
Amount (\$) 2.00	Payee address; 1 Hacker Way Menlo Park, CA 94025		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 10/28/2024	Payee name Facebook		
Amount (\$) 3.00	Payee address; 1 Hacker Way Menlo Park, CA 94025		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
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: 13 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 10/28/2024	5 Payee name Facebook		
6 Amount (\$) 5.00	7 Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 10/28/2024	Payee name Facebook		
Amount (\$) 7.00	Payee address; 1 Hacker Way Menlo Park, CA 94025		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 10/29/2024	Payee name Facebook		
Amount (\$) 10.00	Payee address; 1 Hacker Way Menlo Park, CA 94025		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising		Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A

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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: 14 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 10/29/2024	5 Payee name Mailchimp		
6 Amount (\$) 118.33	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Eblast subscription	
	(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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 10/30/2024	Payee name Facebook		
Amount (\$) 15.00	Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 10/30/2024	Payee name Facebook		
Amount (\$) 15.00	Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
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 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 10/31/2024	5 Payee name Facebook		
6 Amount (\$) 17.00	7 Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 10/31/2024	Payee name Anedot		
Amount (\$) 148.90	Payee address; City; State; Zip Code 1201 W Peachtree St NW Atlanta, GA 30309		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Credit card processing fees	
	<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 11/1/2024	Payee name Facebook		
Amount (\$) 19.00	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) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
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: 16 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 11/4/2024	5 Payee name Facebook		
6 Amount (\$) 21.00	7 Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/4/2024	Payee name Facebook		
Amount (\$) 24.00	Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/4/2024	Payee name Facebook		
Amount (\$) 27.00	Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A

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: 17 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 11/5/2024	5 Payee name Facebook		
6 Amount (\$) 30.00	7 Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/5/2024	Payee name Prestige Printing		
Amount (\$) 686.31	Payee address; 16 Burwood Lane San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description Invitations	
	<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 11/6/2024	Payee name Sams Club		
Amount (\$) 69.40	Payee address; 5055 Northwest Loop 410 San Antonio, TX 78229		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Supplies and drinks	
	<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: 18 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)														
4 Date 11/6/2024	5 Payee name Walmart															
6 Amount (\$) 11.10	7 Payee address; City; State; Zip Code 3302 SE Military Dr San Antonio, TX 78223															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Decorations														
	(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													
<table border="1"> <tr> <td>Date 11/6/2024</td> <td>Payee name Dollar Tree</td> </tr> <tr> <td>Amount (\$) 7.91</td> <td>Payee address; City; State; Zip Code 2031 Goliad Rd San Antonio, TX 78223</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Event Expense</td> <td>Description Supplies and decorations</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 11/6/2024	Payee name Dollar Tree	Amount (\$) 7.91	Payee address; City; State; Zip Code 2031 Goliad Rd San Antonio, TX 78223	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Supplies and decorations	<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 11/6/2024	Payee name Dollar Tree															
Amount (\$) 7.91	Payee address; City; State; Zip Code 2031 Goliad Rd San Antonio, TX 78223															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Supplies and decorations														
	<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													
<table border="1"> <tr> <td>Date 11/6/2024</td> <td>Payee name Facebook</td> </tr> <tr> <td>Amount (\$) 33.00</td> <td>Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Other: Advertising</td> <td>Description Social media ads</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name Ivalis Gonzalez</td> <td>Office sought Council District 8</td> <td>Office held N/A</td> </tr> </table>				Date 11/6/2024	Payee name Facebook	Amount (\$) 33.00	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) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/6/2024	Payee name Facebook															
Amount (\$) 33.00	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) Other: Advertising	Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A													
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: 19 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 11/8/2024	5 Payee name Facebook		
6 Amount (\$) 37.00	7 Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/8/2024	Payee name USPS		
Amount (\$) 146.00	Payee address; 2400 McCullough Ave San Antonio, TX 78212		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Postage	Description Postage	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date 11/8/2024	Payee name HEB		
Amount (\$) 16.68	Payee address; 12777 IH 10 West San Antonio, TX 78230		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Drinks	
	<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: 20 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)														
4 Date 11/12/2024	5 Payee name HEB															
6 Amount (\$) 56.23	7 Payee address; City; State; Zip Code 12777 IH 10 West San Antonio, TX 78230															
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Food party trays for event														
	(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													
<table border="1"> <tr> <td>Date 11/12/2024</td> <td>Payee name HEB</td> </tr> <tr> <td>Amount (\$) 10.09</td> <td>Payee address; City; State; Zip Code 12777 IH 10 West San Antonio, TX 78230</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Event Expense</td> <td>Description Ice</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 11/12/2024	Payee name HEB	Amount (\$) 10.09	Payee address; City; State; Zip Code 12777 IH 10 West San Antonio, TX 78230	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Ice	<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 11/12/2024	Payee name HEB															
Amount (\$) 10.09	Payee address; City; State; Zip Code 12777 IH 10 West San Antonio, TX 78230															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Ice														
	<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													
<table border="1"> <tr> <td>Date 11/12/2024</td> <td>Payee name Dollar Tree</td> </tr> <tr> <td>Amount (\$) 9.74</td> <td>Payee address; City; State; Zip Code 17802 La Cantera Pkwy San Antonio, TX 78257</td> </tr> <tr> <td rowspan="2"> PURPOSE OF EXPENDITURE</td> <td>Category (See categories listed at the top of this schedule) Event Expense</td> <td>Description Decorations</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> <tr> <td>Complete <u>ONLY</u> if direct expenditure to benefit C/OH</td> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>				Date 11/12/2024	Payee name Dollar Tree	Amount (\$) 9.74	Payee address; City; State; Zip Code 17802 La Cantera Pkwy San Antonio, TX 78257	 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Decorations	<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 11/12/2024	Payee name Dollar Tree															
Amount (\$) 9.74	Payee address; City; State; Zip Code 17802 La Cantera Pkwy San Antonio, TX 78257															
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Decorations														
	<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: 21 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 11/12/2024	5 Payee name Sams Club		
6 Amount (\$) 20.98	7 Payee address; City; State; Zip Code 5055 Northwest Loop 410 San Antonio, TX 78229		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description Cookie tray	
	(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 11/12/2024	Payee name Sams Club		
Amount (\$) 38.88	Payee address; City; State; Zip Code 5055 Northwest Loop 410 San Antonio, TX 78229		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Pizzas	
	<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 11/12/2024	Payee name JVC Media		
Amount (\$) 613.13	Payee address; City; State; Zip Code 6856 Alamo Downs Pkwy San Antonio, TX 78238		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description T-shirts	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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: 22 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 11/13/2024	5 Payee name Mailchimp		
6 Amount (\$) 85.28	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Eblast subscription	
	(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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/19/2024	Payee name Jennifer Longoria		
Amount (\$) 192.30	Payee address; 403 Basswood San Antonio, TX 78213		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description Texting services	
	<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 11/20/2024	Payee name VIVA Politics		
Amount (\$) 3500.00	Payee address; 1850 Fredericksburg Rd 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
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: 23 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 11/27/2024	5 Payee name Facebook		
6 Amount (\$) 22.70	7 Payee address; 1 Hacker Way Menlo Park, CA 94025	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Social media 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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/29/2024	Payee name Mailchimp		
Amount (\$) 106.60	Payee address; 405 N Angier Ave NE Atlanta, GA 30308		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Advertising	Description Eblast subscription	
	<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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 11/30/2024	Payee name Anedot		
Amount (\$) 82.20	Payee address; 1201 W Peachtree St NW Atlanta, GA 30309		
 PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Credit card processing fees	
	<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: 24 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 12/31/2024	5 Payee name Mailchimp		
6 Amount (\$) 106.60	7 Payee address; 405 N Angier Ave NE Atlanta, GA 30308	City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising	(b) Description Eblast subscription	
	(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 Ivalis Gonzalez	Office sought Council District 8	Office held N/A
Date 12/31/2024	Payee name Anedot		
Amount (\$) 333.20	Payee address; City; State; Zip Code 1201 W Peachtree St NW Atlanta, GA 30309		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description Credit card processing fees	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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 Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 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
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Date	Payee name
------	------------

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

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

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule F3: 1 of 1</p>	
<p>2 FILER NAME Ivalis M Gonzalez</p>		<p>3 Filer ID (Ethics Commission Filers)</p>	
<p>4 Date</p>	<p>5 Name of person from whom investment is purchased</p> <p>.....</p> <p>6 Address of person from whom investment is purchased; City; State; Zip Code</p>		
	<p>7 Description of investment</p>		
	<p>8 Amount of investment (\$)</p>		
	<p>Name of person from whom investment is purchased</p> <p>.....</p> <p>Address of person from whom investment is purchased; City; State; Zip Code</p>		
<p>Date</p>	<p>Description of investment</p>		
	<p>Amount of investment (\$)</p>		
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p>			

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 Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0	
5 Date 7/1/2024	6 Payee name Flagship Campaigns		
7 Amount (\$) 250.00	8 Payee address; City; State; Zip Code 7926 Broadway #707 San Antonio, TX 78209		
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Data consulting	
	(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 12/12/2024			
Payee name USPS			
Amount (\$) 196.00	Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212		
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Postage		Description Postage
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 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 G: 1 of 1	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)	
4 Date 7/1/2024	5 Payee Name Apple Pay Mastercard		
6 Amount (\$) 250.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO Box 7247 Philadelphia, PA 19170		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description Flagship Campaigns -Data Consulting	
	(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 12/30/2024	Payee name Amazon Prime Visa		
Amount (\$) 196.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 6294 Carol Stream, IL 60197		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other: Postage	Description Postage	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
<input type="checkbox"/> Reimbursement from political contributions intended			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/Donations Made By 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 H: 1 of 1	2 FILER NAME Ivalis M Gonzalez	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 Ivalis M Gonzalez	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.)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: 1 of 2</p>
<p>2 FILER NAME Ivalis M Gonzalez</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 7/8/2024</p>	<p>5 Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code 111 W Houston St #100 San Antonio, TX 78205</p>	<p>8 Amount (\$) 1.43</p>
	<p>7 Purpose for which amount is received Interest on funds in account</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 8/7/2024</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code 111 W Houston St #100 San Antonio, TX 78205</p>	<p>Amount (\$) 1.70</p>
	<p>Purpose for which amount is received Interest on funds in account</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 9/9/2024</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code 111 W Houston St #100 San Antonio, TX 78205</p>	<p>Amount (\$) 1.40</p>
	<p>Purpose for which amount is received Interest on funds in account</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 10/7/2024</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code 111 W Houston St #100 San Antonio, TX 78205</p>	<p>Amount (\$) 0.66</p>
	<p>Purpose for which amount is received Interest on funds in account</p>	<input type="checkbox"/> Check if political contribution returned to filer

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

SCHEDULE K

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule K: 2 of 2</p>
<p>2 FILER NAME Ivalis M Gonzalez</p>		<p>3 Filer ID (Ethics Commission Filers)</p>
<p>4 Date 11/7/2024</p>	<p>5 Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>6 Address of person from whom amount is received; City; State; Zip Code 111 W Houston St #100 San Antonio, TX 78205</p>	<p>8 Amount (\$) 0.61</p>
	<p>7 Purpose for which amount is received Interest on funds in account</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 11/15/2024</p>	<p>Name of person from whom amount is received Hunters Creek Swim & Rec Center</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code 3630 Hunters Cir St San Antonio, TX 78230</p>	<p>Amount (\$) 100.00</p>
	<p>Purpose for which amount is received Refund of deposit for room rental</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date 12/6/2024</p>	<p>Name of person from whom amount is received Frost Bank</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code 111 W Houston St #100 San Antonio, TX 78205</p>	<p>Amount (\$) 0.58</p>
	<p>Purpose for which amount is received Interest on funds in account</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>Date</p>	<p>Name of person from whom amount is received</p> <p>.....</p> <p>Address of person from whom amount is received; City; State; Zip Code</p>	<p>Amount (\$)</p>
	<p>Purpose for which amount is received</p>	<input type="checkbox"/> Check if political contribution returned to filer
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p>		

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

SCHEDULE T

<p>The Instruction Guide explains how to complete this form.</p>		<p>1 Total pages Schedule T: 1 of 1</p>												
<p>2 FILER NAME Ivalis M Gonzalez</p>		<p>3 Filer ID (Ethics Commission Filers)</p>												
<p>4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee</p>														
<p>5 Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td><input type="checkbox"/> Schedule B-SS</td> </tr> </table>			<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
<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									
<p>6 Dates of travel</p>	<p>7 Name of person(s) traveling</p>													
	<p>8 Departure city or name of departure location</p>													
	<p>9 Destination city or name of destination location</p>													
<p>10 Means of transportation</p>	<p>11 Purpose of travel (including name of conference, seminar, or other event)</p>													
<p>Name of Contributor / Corporation or Labor Organization / Pledgor / Payee</p>														
<p>Contribution / Expenditure reported on:</p> <table> <tr> <td><input type="checkbox"/> Schedule A2</td> <td><input type="checkbox"/> Schedule B</td> <td><input type="checkbox"/> Schedule B(J)</td> <td><input type="checkbox"/> Schedule C2</td> <td><input type="checkbox"/> Schedule D</td> <td><input type="checkbox"/> Schedule F1</td> </tr> <tr> <td><input type="checkbox"/> Schedule F2</td> <td><input type="checkbox"/> Schedule F4</td> <td><input type="checkbox"/> Schedule G</td> <td><input type="checkbox"/> Schedule H</td> <td><input type="checkbox"/> Schedule COH-UC</td> <td><input type="checkbox"/> Schedule B-SS</td> </tr> </table>			<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
<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									
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<p>Dates of travel</p>	<p>Name of person(s) traveling</p>													
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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
Ivalis M Gonzalez

Filer ID (Ethics Commission Filers)

SIGNATURE

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

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

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

A. CAMPAIGN FUNDS

Check only one:

I do not have unexpended contributions or unexpended interest or income earned from political contributions.

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

B. ASSETS

Check only one:

I do not retain assets purchased with political contributions or interest or other income from political contributions.

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

Signature of Candidate

OFFICEHOLDER

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

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

Signature of Officeholder