

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	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY	
	NICKNAME	LAST	SUFFIX		
		Ivalis	M	Date Received 1/15/2025 3:03:09PM	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of 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	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	Receipt #	
	NICKNAME	LAST	SUFFIX	Amount \$	
		Melanie		Date Processed 1/15/2025 3:03:09PM	
		Tawil		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	<div> <div>Month Day Year</div> <div>7/1/2024</div> </div> <div>THROUGH</div> <div> <div>Month Day Year</div> <div>12/31/2024</div> </div>				
11 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month Day Year 5/3/2025	<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)
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16 NOTICE FROM POLITICAL COMMITTEE(S)	<small>THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</small>
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COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME COMMITTEE ADDRESS COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER ADDRESS
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☐ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 600.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 33540.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 32338.81
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 23243.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 AFFIDAVIT

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

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ivalis M Gonzalez, this the 15th day of January, 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

The Instruction Guide explains how to complete this form.

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 ☐ out-of-state PAC (ID# _____)
Juan Gutierrez

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**5627 Timber Trace St
San Antonio, TX 78250**

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 ☐ out-of-state PAC (ID# _____)
Art Hall

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**PO Box 929
San Antonio, TX 78294**

Principal occupation / Job title (See instructions)
Vice President

Employer (See instructions)
TCC

Date
8/6/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rosey R. Abuabara

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**12621 Hunters Chase
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Homemaker

Employer (See instructions)
Homemaker

Date
8/15/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**5210 Thousand Oaks Drive #1318
San Antonio, TX 78233**

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**

The Instruction Guide explains how to complete this form.

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 ☐ out-of-state PAC (ID# _____)
Zarathustra Haro

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**7762 Oakhill Park Dr
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)
Real Estate

9 Employer (See instructions)
Northmarq

Date
8/22/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6123 Sinclair Rd.
San Antonio, TX 78222**

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
Madonna Center

Date
9/6/2024

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4811 Isaac Ryan
San Antonio, TX 78253**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
9/6/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**3510 Hunters Dew
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Software Engineer

Employer (See instructions)
Accenture Federal Services

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Zuraya Tapia-Hadley

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**630 18th St S
Arlington, VA 22202**

8 Principal occupation / Job title (See instructions)
Government Affairs

9 Employer (See instructions)
TelevisaUnivision

Date
9/14/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**5743 Ascham Dr.
San Antonio, TX 78228**

Principal occupation / Job title (See instructions)
Supervisor

Employer (See instructions)
Fredericks AC

Date
9/18/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**7415 Quail Run Dr
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Patti Larsen Consulting

Date
9/20/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**2625 Alamo St
Rosenberg, TX 77471**

Principal occupation / Job title (See instructions)
JP

Employer (See instructions)
Fort Bend County

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

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 ☐ out-of-state PAC (ID# _____)
Sarah McLornan

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**115 Paloma Dr
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Homemaker

9 Employer (See instructions)
Homemaker

Date
9/26/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**2 Victory Grn
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Professor

Employer (See instructions)
UT Health

Date
9/26/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2329 W Gramercy PI
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
9/26/2024

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

Amount of contribution (\$)
100.00

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

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self Employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Jesse Zapata

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**7038 Washita Way
San Antonio, TX 78256**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Retired

Date
9/26/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**7 Champions Run
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Ocañas Group

Date
9/26/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**2518 Fairfield Bend Dr
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)
Sr. Project Manager

Employer (See instructions)
HEB

Date
9/26/2024

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**5923 Woodridge Rock
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self Employed

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
9/26/2024

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**2 Victory Grn
San Antonio, TX 78257**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Retired

Date
9/27/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**903 W Huisache Ave
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Healthcare

Employer (See instructions)
STRAC

Date
9/27/2024

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

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**312 Mission Street
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Riley & Riley

Date
9/27/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**15023 Pastura Pass
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Executive Director

Employer (See instructions)
Texas Affiliation of Affordable Housing Providers

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
9/28/2024

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

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**134 West Mistletoe Avenue
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Consultant

9 Employer (See instructions)
Self Employed

Date
10/2/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**12535 Elm Manor St
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Realtor

Employer (See instructions)
Realtor

Date
10/3/2024

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

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**503 Bosque Vista
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Davis Law Firm

Date
10/4/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**217 Carolwood Dr
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Giant Noise

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 35

2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
10/10/2024

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

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**14 Stonewall Bend
San Antonio, TX 78256**

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

9 Employer (See instructions)
Self Employed

Date
10/11/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**13709 Tajamar
Corpus Christi, TX 78414**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
10/14/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**401 Adam St
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
iHeartMedia

Date
10/15/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**7514 Greenbelt Street
San Antonio, TX 78251**

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**

The Instruction Guide explains how to complete this form.

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 ☐ out-of-state PAC (ID# _____)
Ana Luisa Galindo

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**1811 Cassandra St
San Antonio, TX 78224**

8 Principal occupation / Job title (See instructions)
Secretary

9 Employer (See instructions)
Government

Date
10/16/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**329 Mary Louise DR
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
10/17/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**4 Montique Ct.
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Student

Employer (See instructions)
Student

Date
10/17/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**360 Pike Road
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Communications

Employer (See instructions)
talkStrategy

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Carolina Bilano

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**6227 Cypress Circle
San Antonio, TX 78240**

8 Principal occupation / Job title (See instructions)
Student

9 Employer (See instructions)
Student

Date
10/18/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**723 E Drexel Ave
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
10/18/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**639 Mission Street
San Antonio, TX 78210**

Principal occupation / Job title (See instructions)
Executive Director

Employer (See instructions)
CAST Schools

Date
10/18/2024

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

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**105 Blackhawk Trail
San Antonio, TX 78232**

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**

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
10/19/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gloria Mayo-Moreno

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**730 Babcock Rd #1104
San Antonio, TX 78201**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Retired

Date
10/19/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**659 Aurora Ave
San Antonio, TX 78228**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
10/19/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**343 Springwood Ln
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
10/19/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3915 Fawnridge Dr
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 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 <input type="checkbox"/> out-of-state PAC (ID# _____) Norma Reyes 6 Contributor address; City; State; Zip Code 348 Alexander Hamilton Dr San Antonio, TX 78228	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose Gonzalez Contributor address; City; State; Zip Code 1101 W.Huisache Ave. San Antonio, TX 78201	Amount of contribution (\$) 30.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elizabeth Fauerso Contributor address; City; State; Zip Code 216 Carolwood Dr San Antonio, TX 78213	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) EBF
Date 10/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lisa Andrade Gonima Contributor address; City; State; Zip Code 222 West Mulberry Ave San Antonio, TX 78212	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Del Rey Transportation LLC
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
10/19/2024

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**26034 Hazy Hollow Drive
San Antonio, TX 78255**

8 Principal occupation / Job title (See instructions)
PA-c

9 Employer (See instructions)
SFP

Date
10/19/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**14319 Hill Prince
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Niche

Date
10/19/2024

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

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**8623 Shady MTN
San Antonio, TX 78254**

Principal occupation / Job title (See instructions)
Realtor

Employer (See instructions)
Self Employed

Date
10/19/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**103 Squires Row
San Antonio, TX 78213**

Principal occupation / Job title (See instructions)
Marketing

Employer (See instructions)
Silver Ventures

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
10/19/2024

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

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**6963 Willow Oak Street
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)
Scrum Master

9 Employer (See instructions)
USAA

Date
10/20/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**132 W Elmview Pl
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Vice President

Employer (See instructions)
Santana Consulting Group

Date
10/20/2024

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

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**6021 Mike Nesmith Dr
San Antonio, TX 78238**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Incarnate Word Highschool

Date
10/22/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**9213 Powhatan Drive
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
10/23/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Melanie Mendez-Gonzalez

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**410 E. Rampart Dr
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
Managing Partner

9 Employer (See instructions)
MMG Media

Date
10/23/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**522 Possum Oak
Shavano Park, TX 78230**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
ANG PLLC

Date
10/23/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**4330 Diamondhead Drive
San Antonio, TX 78218**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Adriana El-Farrah

Date
10/29/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**13538 Barsan Rd.
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Leal Food Mart Inc

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 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 <input type="checkbox"/> out-of-state PAC (ID# _____) Virginia Sandoval 6 Contributor address; City; State; Zip Code 6963 Willow Oak Street San Antonio, TX 78249	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) Scrum Master		9 Employer (See instructions) USAA
Date 11/9/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Timothy Carrasco Contributor address; City; State; Zip Code 6963 Willow Oak Drive San Antonio, TX 78249	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Part time teacher		Employer (See instructions) SAISD
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hilda Levine Contributor address; City; State; Zip Code 4406 Black Walnut Woods San Antonio, TX 78249	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 11/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Perez Contributor address; City; State; Zip Code 4823 Rollingfield Dr. San Antonio, TX 78228	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
11/11/2024

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**7402 Round Mtn
San Antonio, TX 78255**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Retired

Date
11/13/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3510 Hunters Sound St
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
11/13/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**5910 Wales
San Antonio, TX 78223**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Linebarger

Date
11/16/2024

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**6082 Crab Orchard
San Antonio, TX 78240**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
11/16/2024

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**13114 Hunters Valley St
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)
retired

9 Employer (See instructions)
retired

Date
11/18/2024

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

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**13143 Hunters Spring St
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
retired

Date
11/18/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**3110 Apache Plume
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Circle K

Date
11/18/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**12726 Cranes Mill
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
11/18/2024

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

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**13830 Hunters Hawk St.
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Retired

Date
11/18/2024

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

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**6963 Willow Oak Street
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Scrum Master

Employer (See instructions)
USAA

Date
11/19/2024

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

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**15662 Robin Ridge
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
12/2/2024

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

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**19307 Atoko Way
San Antonio, TX 78256**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
12/2/2024

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

7 Amount of contribution (\$)
150.00

6 Contributor address; City; State; Zip Code
**3568 Red Oak Ln
San Antonio, TX 78230**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Retired

Date
12/7/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**13118 Neumann Cove
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Realtor

Employer (See instructions)
Self employed

Date
12/10/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**PO Box 592055
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
12/10/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gerald W. Lee

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**8127 New Braunfels #801
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Andrade- Van de Putte

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
12/10/2024

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Daniel Kellum Jr.

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**330 E Summit Ave
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
Physician

9 Employer (See instructions)
Self employed

Date
12/11/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**901 NE Loop 410 #909
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Investor

Employer (See instructions)
Self employed

Date
12/11/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 592055
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
Firm Administrator

Employer (See instructions)
David Canales PLLC

Date
12/11/2024

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

Amount of contribution (\$)
400.00

Contributor address; City; State; Zip Code
**PO Box 592055
San Antonio, TX 78259**

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**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
12/11/2024

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**107 Crofton Ave
San Antonio, TX 78210**

8 Principal occupation / Job title (See instructions)
Physician

9 Employer (See instructions)
UT Health San Antonio

Date
12/11/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**25843 Scenic Rock
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Dominion Family Healthcare

Date
12/12/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1 Molas Dr.
Durango, CO 81301**

Principal occupation / Job title (See instructions)
Business Owner

Employer (See instructions)
Self employed

Date
12/12/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**1 Molas Dr.
Durango, CO 81301**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
12/12/2024

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

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1 Lone Star Pass
San Antonio, TX 78264**

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

9 Employer (See instructions)
Self employed

Date
12/14/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**520 Geneseo Road
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
12/14/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**1 Buckingham CT
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Self employed

Employer (See instructions)
Self Employed

Date
12/17/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**13707 Cape Bluff
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date
12/17/2024

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

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
7334 Blanco Rd #200
San Antonio, TX 78216

8 Principal occupation / Job title (See instructions)
President

9 Employer (See instructions)
Foresight Asset Management

Date
12/17/2024

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

Amount of contribution (\$)
150.00

Contributor address; City; State; Zip Code
317 Newburn Drive
Pittsburgh, PA 15216

Principal occupation / Job title (See instructions)
Owner

Employer (See instructions)
Intend

Date
12/17/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
Brown and McDonald PLLC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
100 NE Loop 410 #1385
San Antonio, TX 78216

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date
12/18/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
214 Blackjack Oak
Shavano Park, TX 78230

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
George Salinas Injury Lawyers

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Raul Lomeli-Azoubel

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**3318 Sable Creek
San Antonio, TX 78259**

8 Principal occupation / Job title (See instructions)
Chairman

9 Employer (See instructions)
Welcome Tech Inc

Date
12/23/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**3830 Balentine
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Government Relations

Employer (See instructions)
Walmart

Date
12/25/2024

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

Amount of contribution (\$)
250.00

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

Principal occupation / Job title (See instructions)
Consultant

Employer (See instructions)
Self employed

Date
12/25/2024

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

Amount of contribution (\$)
175.00

Contributor address; City; State; Zip Code
**2733 35th Street Northwest
Washington, DC 20007**

Principal occupation / Job title (See instructions)
Executive

Employer (See instructions)
Great Springs Project

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Andrea Figueroa

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**6622 Moss Oak Dr
San Antonio, TX 78229**

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 ☐ out-of-state PAC (ID# _____)
David Zammiello

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**9721 Mandalay Way
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Business Consultant

Employer (See instructions)
DAZA Consulting

Date
12/28/2024

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

Amount of contribution (\$)
20.00

Contributor address; City; State; Zip Code
**12835 Castle Bend Street
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
12/28/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**12402 King Walnut
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Associate

Employer (See instructions)
AVDP & Assoc

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Paul Ruiz

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**634 Spacious Sky
San Antonio, TX 78260**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Retired

Date
12/29/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**3226 Spider Lily
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Lawyer

Employer (See instructions)
RPSA law

Date
12/30/2024

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

Amount of contribution (\$)
100.00

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

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
EDreimagined

Date
12/30/2024

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6410 View Point
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
Council Aide

Employer (See instructions)
Government

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Grant Jacobson

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**124 Edgewood Pl
San Antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Consultant

9 Employer (See instructions)
Momentum Advisory Services

Date
12/30/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**409 E Olmos Drive
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Associate Creative Director

Employer (See instructions)
Chamoy Creative

Date
12/30/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**7 Champions Run
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
12/31/2024

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

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**3006 King Maple
San Antonio, TX 78230**

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**

The Instruction Guide explains how to complete this form.

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 ☐ out-of-state PAC (ID# _____)
Leticia Van de Putte

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**222 Herweck Dr
San Antonio, TX 78213**

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

9 Employer (See instructions)
Andrade-VandePutte

Date
12/31/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**3430 Hunters Stand St
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
12/31/2024

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

Amount of contribution (\$)
15.00

Contributor address; City; State; Zip Code
**964 Palo Verde Avenue
Long Beach, CA 90815**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
12/31/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**8323 Magdalena Run
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Electronics Engineer

Employer (See instructions)
United States Air Force

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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 ☐ out-of-state PAC (ID# _____)
Paul Stahl

7 Amount of contribution (\$)
150.00

6 Contributor address; City; State; Zip Code
**21715 Chaucer Hill
San Antonio, TX 78256**

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 ☐ out-of-state PAC (ID# _____)
JoNeen Serna

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**11226 Rose Canyon
Helotes, TX 78023**

Principal occupation / Job title (See instructions)
Director of Philanthropy

Employer (See instructions)
Christus Health

Date
12/31/2024

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**134 Park Hill Dr
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Security Consultant

Employer (See instructions)
Bytewhisper Security

Date
12/31/2024

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**2603 Country Square St
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Architect

Employer (See instructions)
StudioMassivo

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 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 <input type="checkbox"/> out-of-state PAC (ID# _____) Jeffrie Lewis 6 Contributor address; City; State; Zip Code 13502 Bay Orchard Dr San Antonio, TX 78231	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See instructions) Attorney		9 Employer (See instructions) Zachary Group
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Belinda Benavidez Contributor address; City; State; Zip Code 7310 Centerfield Rd San Antonio, TX 78240	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) Director		Employer (See instructions) American Cancer Society
Date 12/31/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Virginia Sandoval Contributor address; City; State; Zip Code 6963 Willow Oak Street San Antonio, TX 78249	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Scruum Master		Employer (See instructions) Usa
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See instructions)		Employer (See instructions)
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
2 of 3

2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
10/19/2024

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

8 Amount of Contribution \$ **500.00**

9 In-kind contribution description
Food for fundraiser

7 Contributor address; City; State; Zip Code
**1111 S General McMullen Dr
San Antonio, TX 78237**

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

11 Employer (FOR NON-JUDICIAL) (See instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date
10/19/2024

Full name of contributor ☐ out-of-state PAC (ID# _____)
EBF Development and Design Studio

Amount of Contribution \$ **500.00**

In-kind contribution description
Food for fundraiser

Contributor address; City; State; Zip Code
**216 Carolwood Dr
San Antonio, TX 78213**

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

Employer (FOR NON-JUDICIAL) (See instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE **A2**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:
3 of 3

2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date
11/19/2024

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

8 Amount of Contribution \$ **500.00**

9 In-kind contribution description
Labor

7 Contributor address; City; State; Zip Code
**1803 S Presa
San Antonio, TX 78210**

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

11 Employer (FOR NON-JUDICIAL) (See instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date
11/19/2024

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

Amount of Contribution \$ **500.00**

In-kind contribution description
Labor

Contributor address; City; State; Zip Code
**1844 Fredericksburg
San Antonio, TX 78201**

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)

Employer (FOR NON-JUDICIAL) (See instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

PLEDGED CONTRIBUTIONS

SCHEDULE B

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

7 Name of lender ☐ out-of-state PAC (ID# _____)

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral
☐ none

15 ☐ Check if personal funds were deposited into political
account (See instructions)

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID# _____)

Loan Amount (\$)

Is lender a
financial
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral
☐ none

☐ Check if personal funds were deposited into political
account (See Instructions)

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE F1

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

Event Expense	Loan Repayment/Reimbursement
Fees	Office Overhead/Rental Expense
Food/Beverage Expense	Polling Expense
Gifts/Awards/Memorials Expense	Printing Expense
Legal Services	Salaries/Wages/Contract Labor

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

1 Total pages Schedule F1: 1 of 24	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)
---	---	--

5 Payee name
Mailchimp

7 Payee address;	City;	State;	Zip Code
405 N Angier Ave NE			
Atlanta, GA 30308			

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

(b) Description	Eblast subscription
-----------------	---------------------

(c) ☐ Check if travel outside of Texas, complete schedule T ☐ Check if Austin, TX, officeholder living expense

Candidate / Officeholder name
Ivalis Gonzalez

Office sought	Office held
Council District 8	N/A

Payee name
Ivalis M Gonzalez

Payee address; City; State; Zip Code
PO Box 782094
San Antonio, TX 78278

Category (See categories listed at the top of this schedule)
Loan Repayment/Reimbursement

Description
Reimbursement of expense using personal funds

☐ Check if travel outside of Texas, complete schedule T ☐ Check if Austin, TX, officeholder living expense

Candidate / Officeholder name

Office sought	Office held
1. Chief of Police	1. Chief of Police
2. Deputy Chief of Police	2. Deputy Chief of Police
3. Captain	3. Captain
4. Sergeant	4. Sergeant
5. Detective	5. Detective
6. Patrolman	6. Patrolman
7. Traffic Officer	7. Traffic Officer
8. Community Relations Officer	8. Community Relations Officer
9. Training Officer	9. Training Officer
10. Records Officer	10. Records Officer
11. Legal Officer	11. Legal Officer
12. Public Affairs Officer	12. Public Affairs Officer
13. Crime Prevention Officer	13. Crime Prevention Officer
14. Community Outreach Officer	14. Community Outreach Officer
15. Youth Services Officer	15. Youth Services Officer
16. Adult Services Officer	16. Adult Services Officer
17. Elder Services Officer	17. Elder Services Officer
18. Domestic Violence Officer	18. Domestic Violence Officer
19. Child Welfare Officer	19. Child Welfare Officer
20. Juvenile Services Officer	20. Juvenile Services Officer
21. Probation Officer	21. Probation Officer
22. Parole Officer	22. Parole Officer
23. Court Services Officer	23. Court Services Officer
24. Victim Services Officer	24. Victim Services Officer
25. Witness Services Officer	25. Witness Services Officer
26. Crime Victims Compensation Officer	26. Crime Victims Compensation Officer
27. Crime Victims Assistance Officer	27. Crime Victims Assistance Officer
28. Crime Victims Support Officer	28. Crime Victims Support Officer
29. Crime Victims Advocacy Officer	29. Crime Victims Advocacy Officer
30. Crime Victims Outreach Officer	30. Crime Victims Outreach Officer
31. Crime Victims Referral Officer	31. Crime Victims Referral Officer
32. Crime Victims Intake Officer	32. Crime Victims Intake Officer
33. Crime Victims Assessment Officer	33. Crime Victims Assessment Officer
34. Crime Victims Interview Officer	34. Crime Victims Interview Officer
35. Crime Victims Interviewing Officer	35. Crime Victims Interviewing Officer
36. Crime Victims Interviewing Supervisor	36. Crime Victims Interviewing Supervisor
37. Crime Victims Interviewing Coordinator	37. Crime Victims Interviewing Coordinator
38. Crime Victims Interviewing Manager	38. Crime Victims Interviewing Manager
39. Crime Victims Interviewing Director	39. Crime Victims Interviewing Director
40. Crime Victims Interviewing Executive	40. Crime Victims Interviewing Executive
41. Crime Victims Interviewing President	41. Crime Victims Interviewing President
42. Crime Victims Interviewing Vice President	42. Crime Victims Interviewing Vice President
43. Crime Victims Interviewing Secretary	43. Crime Victims Interviewing Secretary
44. Crime Victims Interviewing Assistant	44. Crime Victims Interviewing Assistant
45. Crime Victims Interviewing Aide	45. Crime Victims Interviewing Aide
46. Crime Victims Interviewing Clerk	46. Crime Victims Interviewing Clerk
47. Crime Victims Interviewing Receptionist	47. Crime Victims Interviewing Receptionist
48. Crime Victims Interviewing Operator	48. Crime Victims Interviewing Operator
49. Crime Victims Interviewing Technician	49. Crime Victims Interviewing Technician
50. Crime Victims Interviewing Specialist	50. Crime Victims Interviewing Specialist
51. Crime Victims Interviewing Analyst	51. Crime Victims Interviewing Analyst
52. Crime Victims Interviewing Researcher	52. Crime Victims Interviewing Researcher
53. Crime Victims Interviewing Writer	53. Crime Victims Interviewing Writer
54. Crime Victims Interviewing Editor	54. Crime Victims Interviewing Editor
55. Crime Victims Interviewing Publisher	55. Crime Victims Interviewing Publisher
56. Crime Victims Interviewing Distributor	56. Crime Victims Interviewing Distributor
57. Crime Victims Interviewing Retailer	57. Crime Victims Interviewing Retailer
58. Crime Victims Interviewing Wholesaler	58. Crime Victims Interviewing Wholesaler
59. Crime Victims Interviewing Importer	59. Crime Victims Interviewing Importer
60. Crime Victims Interviewing Exporter	60. Crime Victims Interviewing Exporter
61. Crime Victims Interviewing Broker	61. Crime Victims Interviewing Broker
62. Crime Victims Interviewing Agent	62. Crime Victims Interviewing Agent
63. Crime Victims Interviewing Representative	63. Crime Victims Interviewing Representative
64. Crime Victims Interviewing Consultant	64. Crime Victims Interviewing Consultant
65. Crime Victims Interviewing Advisor	65. Crime Victims Interviewing Advisor
66. Crime Victims Interviewing Coach	66. Crime Victims Interviewing Coach
67. Crime Victims Interviewing Trainer	67. Crime Victims Interviewing Trainer
68. Crime Victims Interviewing Instructor	68. Crime Victims Interviewing Instructor
69. Crime Victims Interviewing Lecturer	69. Crime Victims Interviewing Lecturer
70. Crime Victims Interviewing Professor	70. Crime Victims Interviewing Professor
71. Crime Victims Interviewing Doctor	71. Crime Victims Interviewing Doctor
72. Crime Victims Interviewing Lawyer	72. Crime Victims Interviewing Lawyer
73. Crime Victims Interviewing Judge	73. Crime Victims Interviewing Judge
74. Crime Victims Interviewing Minister	74. Crime Victims Interviewing Minister
75. Crime Victims Interviewing Priest	75. Crime Victims Interviewing Priest
76. Crime Victims Interviewing Pastor	76. Crime Victims Interviewing Pastor
77. Crime Victims Interviewing Rabbi	77. Crime Victims Interviewing Rabbi
78. Crime Victims Interviewing Imam	78. Crime Victims Interviewing Imam
79. Crime Victims Interviewing Monk	79. Crime Victims Interviewing Monk
80. Crime Victims Interviewing Nun	80. Crime Victims Interviewing Nun
81. Crime Victims Interviewing Bishop	81. Crime Victims Interviewing Bishop
82. Crime Victims Interviewing Cardinal	82. Crime Victims Interviewing Cardinal
83. Crime Victims Interviewing Pope	83. Crime Victims Interviewing Pope
84. Crime Victims Interviewing Archbishop	84. Crime Victims Interviewing Archbishop
85. Crime Victims Interviewing Metropolitan	85. Crime Victims Interviewing Metropolitan
86. Crime Victims Interviewing Suffragan	86. Crime Victims Interviewing Suffragan
87. Crime Victims Interviewing Vicar	87. Crime Victims Interviewing Vicar
88. Crime Victims Interviewing Canon	88. Crime Victims Interviewing Canon
89. Crime Victims Interviewing Priest	89. Crime Victims Interviewing Priest
90. Crime Victims Interviewing Deacon	90. Crime Victims Interviewing Deacon
91. Crime Victims Interviewing Monk	91. Crime Victims Interviewing Monk
92. Crime Victims Interviewing Nun	92. Crime Victims Interviewing Nun
93. Crime Victims Interviewing Bishop	93. Crime Victims Interviewing Bishop
94. Crime Victims Interviewing Cardinal	94. Crime Victims Interviewing Cardinal
95. Crime Victims Interviewing Pope	95. Crime Victims Interviewing Pope
96. Crime Victims Interviewing Archbishop	96. Crime Victims Interviewing Archbishop
97. Crime Victims Interviewing Metropolitan	97. Crime Victims Interviewing Metropolitan
98. Crime Victims Interviewing Suffragan	98. Crime Victims Interviewing Suffragan
99. Crime Victims Interviewing Vicar	99. Crime Victims Interviewing Vicar
100. Crime Victims Interviewing Canon	100. Crime Victims Interviewing Canon

Payee name
Ivalis M Gonzalez

Payee address;	City;	State;	Zip Code
PO Box 782094			
San Antonio, TX 78278			

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
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Candidate / Officeholder name

Office sought	Office held
1. Chief of Police	1. Chief of Police
2. Deputy Chief of Police	2. Deputy Chief of Police
3. Captain	3. Captain
4. Sergeant	4. Sergeant
5. Detective	5. Detective
6. Patrolman	6. Patrolman
7. Traffic Officer	7. Traffic Officer
8. Community Relations Officer	8. Community Relations Officer
9. Training Officer	9. Training Officer
10. Records Officer	10. Records Officer
11. Legal Officer	11. Legal Officer
12. Public Affairs Officer	12. Public Affairs Officer
13. Crime Prevention Officer	13. Crime Prevention Officer
14. Community Outreach Officer	14. Community Outreach Officer
15. Youth Services Officer	15. Youth Services Officer
16. Adult Services Officer	16. Adult Services Officer
17. Elder Services Officer	17. Elder Services Officer
18. Domestic Violence Officer	18. Domestic Violence Officer
19. Child Welfare Officer	19. Child Welfare Officer
20. Substance Abuse Officer	20. Substance Abuse Officer
21. Mental Health Officer	21. Mental Health Officer
22. Probation Officer	22. Probation Officer
23. Parole Officer	23. Parole Officer
24. Court Services Officer	24. Court Services Officer
25. Juvenile Services Officer	25. Juvenile Services Officer
26. Adult Services Officer	26. Adult Services Officer
27. Elder Services Officer	27. Elder Services Officer
28. Domestic Violence Officer	28. Domestic Violence Officer
29. Child Welfare Officer	29. Child Welfare Officer
30. Substance Abuse Officer	30. Substance Abuse Officer
31. Mental Health Officer	31. Mental Health Officer
32. Probation Officer	32. Probation Officer
33. Parole Officer	33. Parole Officer
34. Court Services Officer	34. Court Services Officer
35. Juvenile Services Officer	35. Juvenile Services Officer
36. Adult Services Officer	36. Adult Services Officer
37. Elder Services Officer	37. Elder Services Officer
38. Domestic Violence Officer	38. Domestic Violence Officer
39. Child Welfare Officer	39. Child Welfare Officer
40. Substance Abuse Officer	40. Substance Abuse Officer
41. Mental Health Officer	41. Mental Health Officer
42. Probation Officer	42. Probation Officer
43. Parole Officer	43. Parole Officer
44. Court Services Officer	44. Court Services Officer
45. Juvenile Services Officer	45. Juvenile Services Officer
46. Adult Services Officer	46. Adult Services Officer
47. Elder Services Officer	47. Elder Services Officer
48. Domestic Violence Officer	48. Domestic Violence Officer
49. Child Welfare Officer	49. Child Welfare Officer
50. Substance Abuse Officer	50. Substance Abuse Officer
51. Mental Health Officer	51. Mental Health Officer
52. Probation Officer	52. Probation Officer
53. Parole Officer	53. Parole Officer
54. Court Services Officer	54. Court Services Officer
55. Juvenile Services Officer	55. Juvenile Services Officer
56. Adult Services Officer	56. Adult Services Officer
57. Elder Services Officer	57. Elder Services Officer
58. Domestic Violence Officer	58. Domestic Violence Officer
59. Child Welfare Officer	59. Child Welfare Officer
60. Substance Abuse Officer	60. Substance Abuse Officer
61. Mental Health Officer	61. Mental Health Officer
62. Probation Officer	62. Probation Officer
63. Parole Officer	63. Parole Officer
64. Court Services Officer	64. Court Services Officer
65. Juvenile Services Officer	65. Juvenile Services Officer
66. Adult Services Officer	66. Adult Services Officer
67. Elder Services Officer	67. Elder Services Officer
68. Domestic Violence Officer	68. Domestic Violence Officer
69. Child Welfare Officer	69. Child Welfare Officer
70. Substance Abuse Officer	70. Substance Abuse Officer
71. Mental Health Officer	71. Mental Health Officer
72. Probation Officer	72. Probation Officer
73. Parole Officer	73. Parole Officer
74. Court Services Officer	74. Court Services Officer
75. Juvenile Services Officer	75. Juvenile Services Officer
76. Adult Services Officer	76. Adult Services Officer
77. Elder Services Officer	77. Elder Services Officer
78. Domestic Violence Officer	78. Domestic Violence Officer
79. Child Welfare Officer	79. Child Welfare Officer
80. Substance Abuse Officer	80. Substance Abuse Officer
81. Mental Health Officer	81. Mental Health Officer
82. Probation Officer	82. Probation Officer
83. Parole Officer	83. Parole Officer
84. Court Services Officer	84. Court Services Officer
85. Juvenile Services Officer	85. Juvenile Services Officer
86. Adult Services Officer	86. Adult Services Officer
87. Elder Services Officer	87. Elder Services Officer
88. Domestic Violence Officer	88. Domestic Violence Officer
89. Child Welfare Officer	89. Child Welfare Officer
90. Substance Abuse Officer	90. Substance Abuse Officer
91. Mental Health Officer	91. Mental Health Officer
92. Probation Officer	92. Probation Officer
93. Parole Officer	93. Parole Officer
94. Court Services Officer	94. Court Services Officer
95. Juvenile Services Officer	95. Juvenile Services Officer
96. Adult Services Officer	96. Adult Services Officer
97. Elder Services Officer	97. Elder Services Officer
98. Domestic Violence Officer	98. Domestic Violence Officer
99. Child Welfare Officer	99. Child Welfare Officer
100. Substance Abuse Officer	100. Substance Abuse Officer
101. Mental Health Officer	101. Mental Health Officer
102. Probation Officer	102. Probation Officer
103. Parole Officer	103. Parole Officer
104. Court Services Officer	104. Court Services Officer
105. Juvenile Services Officer	105. Juvenile Services Officer
106. Adult Services Officer	106. Adult Services Officer
107. Elder Services Officer	107. Elder Services Officer
108. Domestic Violence Officer	108. Domestic Violence Officer
109. Child Welfare Officer	109. Child Welfare Officer
110. Substance Abuse Officer	110. Substance Abuse Officer
111. Mental Health Officer	111. Mental Health Officer
112. Probation Officer	112. Probation Officer
113. Parole Officer	113. Parole Officer
114. Court Services Officer	114. Court Services Officer
115. Juvenile Services Officer	115. Juvenile Services Officer
116. Adult Services Officer	116. Adult Services Officer
117. Elder Services Officer	117. Elder Services Officer
118. Domestic Violence Officer	118. Domestic Violence Officer
119. Child Welfare Officer	119. Child Welfare Officer
120. Substance Abuse Officer	120. Substance Abuse Officer
121. Mental Health Officer	121. Mental Health Officer
122. Probation Officer	122. Probation Officer
123. Parole Officer	123. Parole Officer
124. Court Services Officer	124. Court Services Officer
125. Juvenile Services Officer	125. Juvenile Services Officer
126. Adult Services Officer	126. Adult Services Officer
127. Elder Services Officer	127. Elder Services Officer
128. Domestic Violence Officer	128. Domestic Violence Officer
129. Child Welfare Officer	129. Child Welfare Officer
130. Substance Abuse Officer	

Forms provided by Texas Ethics Commission

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 2 of 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 Office held Council District 8 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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 3 of 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		
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 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		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 7926 Broadway #707 San Antonio, TX 78209		
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			
Date 8/7/2024	Payee name Abuelas Mexican Restaurant		
Amount (\$) 30.73	Payee address; City; State; Zip Code 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 8/15/2024	Payee name Roger Caballero		
Amount (\$) 500.00	Payee address; City; State; Zip Code 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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 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			
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 8/22/2024	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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 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 Office sought Office held																		
<table border="0"> <tr> <td>Date 8/29/2024</td> <td colspan="3">Payee name Mailchimp</td> </tr> <tr> <td>Amount (\$) 125.26</td> <td colspan="3">Payee address; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td colspan="2">Category (See categories listed at the top of this schedule) Other: Advertising</td> <td>Description Eblast subscription</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				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		
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																	
<table border="0"> <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>				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											
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															
<table border="0"> <tr> <td>Date 8/31/2024</td> <td colspan="3">Payee name Anedot</td> </tr> <tr> <td>Amount (\$) 10.30</td> <td colspan="3">Payee address; City; State; Zip Code 1201 W Peachtree St NW Atlanta, GA 30309</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td colspan="2">Category (See categories listed at the top of this schedule) Fees</td> <td>Description Credit card processing fees</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				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		
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																	
<table border="0"> <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>				Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held											
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held															

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 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; City; State; Zip Code PO Box 790086 San Antonio, TX 78279		
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; City; State; Zip Code 13114 Lookout Run San Antoni, TX 78233		
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; 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 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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 8 of 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			
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 9/30/2024	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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 9 of 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 Office sought Office held		
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 Office sought Office held		
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 Office sought Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 10 of 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			
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 10/15/2024	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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 11 of 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 Office sought Office held																		
<table border="0"> <tr> <td>Date 10/28/2024</td> <td colspan="3">Payee name Facebook</td> </tr> <tr> <td>Amount (\$) 2.00</td> <td colspan="3">Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td colspan="2">Category (See categories listed at the top of this schedule) Other: Advertising</td> <td>Description Social media ads</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				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		
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																	
<table border="0"> <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>				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											
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															
<table border="0"> <tr> <td>Date 10/28/2024</td> <td colspan="3">Payee name Facebook</td> </tr> <tr> <td>Amount (\$) 2.00</td> <td colspan="3">Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025</td> </tr> <tr> <td rowspan="2">PURPOSE OF EXPENDITURE</td> <td colspan="2">Category (See categories listed at the top of this schedule) Other: Advertising</td> <td>Description Social media ads</td> </tr> <tr> <td colspan="3"><input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense</td> </tr> </table>				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		
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																	
<table border="0"> <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>				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											
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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 12 of 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; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) 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; 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 10/28/2024	Payee name Facebook	
Amount (\$) 3.00	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 13 of 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; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) 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; 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 10/29/2024	Payee name Facebook		
Amount (\$) 10.00	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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 14 of 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; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308		
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; 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 10/30/2024	Payee name Facebook		
Amount (\$) 15.00	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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) 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; 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 11/4/2024	Payee name Facebook	
Amount (\$) 27.00	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) 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; City; State; Zip Code 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; 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 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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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			
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 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 Office sought Office held Ivalis Gonzalez Council District 8 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	Gifts/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) 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; City; State; Zip Code 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; 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 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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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			
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 Dollar Tree		
Amount (\$) 9.74	Payee address; City; State; Zip Code 17802 La Cantera Pkway 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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308		
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; City; State; Zip Code 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; 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			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) 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; 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

Date 11/30/2024	Payee name Anedot	
Amount (\$) 82.20	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

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 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; City; State; Zip Code 405 N Angier Ave NE Atlanta, GA 30308		
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

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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

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

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

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

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

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

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

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

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME
Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

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

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F4: 1 of 1	2 FILER NAME Ivalis M Gonzalez	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
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5 Date 7/1/2024	6 Payee name Flagship Campaigns
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7 Amount (\$) 250.00	8 Payee address; City; State; Zip Code 7926 Broadway #707 San Antonio, TX 78209
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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
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Date 12/12/2024	Payee name USPS
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Amount (\$) 196.00	Payee address; City; State; Zip Code 2400 McCullough Ave San Antonio, TX 78212
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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
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule G: 1 of 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 (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule H: 1 of 1	2 FILER NAME 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		

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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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 2

2 FILER NAME

Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date

7/8/2024

5 Name of person from whom amount is received

Frost Bank

8 Amount (\$)

1.43

6 Address of person from whom amount is received; City; State; Zip Code

111 W Houston St #100
San Antonio, TX 78205

7 Purpose for which amount is received

Interest on funds in account

☐ Check if political contribution returned to filer

Date

8/7/2024

Name of person from whom amount is received

Frost Bank

Amount (\$)

1.70

Address of person from whom amount is received; City; State; Zip Code

111 W Houston St #100
San Antonio, TX 78205

Purpose for which amount is received

Interest on funds in account

☐ Check if political contribution returned to filer

Date

9/9/2024

Name of person from whom amount is received

Frost Bank

Amount (\$)

1.40

Address of person from whom amount is received; City; State; Zip Code

111 W Houston St #100
San Antonio, TX 78205

Purpose for which amount is received

Interest on funds in account

☐ Check if political contribution returned to filer

Date

10/7/2024

Name of person from whom amount is received

Frost Bank

Amount (\$)

0.66

Address of person from whom amount is received; City; State; Zip Code

111 W Houston St #100
San Antonio, TX 78205

Purpose for which amount is received

Interest on funds in account

☐ Check if political contribution returned to filer

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE **K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

2 of 2

2 FILER NAME

Ivalis M Gonzalez

3 Filer ID (Ethics Commission Filers)

4 Date

11/7/2024

5 Name of person from whom amount is received

Frost Bank

8 Amount (\$)

0.61

6 Address of person from whom amount is received; City; State; Zip Code

111 W Houston St #100

San Antonio, TX 78205

7 Purpose for which amount is received

Interest on funds in account

☐ Check if political contribution returned to filer

Date

11/15/2024

Name of person from whom amount is received

Hunters Creek Swim & Rec Center

Amount (\$)

100.00

Address of person from whom amount is received; City; State; Zip Code

3630 Hunters Cir St

San Antonio, TX 78230

Purpose for which amount is received

Refund of deposit for room rental

☐ Check if political contribution returned to filer

Date

12/6/2024

Name of person from whom amount is received

Frost Bank

Amount (\$)

0.58

Address of person from whom amount is received; City; State; Zip Code

111 W Houston St #100

San Antonio, TX 78205

Purpose for which amount is received

Interest on funds in account

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

☐ Check if political contribution returned to filer

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: 1 of 1
2 FILER NAME Ivalis M Gonzalez		3 Filer ID (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on: <div style="display: flex; flex-wrap: wrap; justify-content: space-between; padding: 5px 0;"><div><input type="checkbox"/> Schedule A2</div><div><input type="checkbox"/> Schedule B</div><div><input type="checkbox"/> Schedule B(J)</div><div><input type="checkbox"/> Schedule C2</div><div><input type="checkbox"/> Schedule D</div><div><input type="checkbox"/> Schedule F1</div><div><input type="checkbox"/> Schedule F2</div><div><input type="checkbox"/> Schedule F4</div><div><input type="checkbox"/> Schedule G</div><div><input type="checkbox"/> Schedule H</div><div><input type="checkbox"/> Schedule COH-UC</div><div><input type="checkbox"/> Schedule B-SS</div></div>		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
•• Complete only if "Report Type" on page 1 is marked "Final Report" ••

C/OH NAME
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