CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction G	uide explains how to complete	this form.	1 Filer ID (Eth	nics Commission Filers)	2 Total pages fi	led:
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIR Mr Alb	ST perto		лі 4	OFFICE US	SE ONLY
NAME	NICKNAME LAS	 ST	 S		Date Received	
	Beto Alt	amirano			4/27/2025 1:09:3	B5PM
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SU 2003 W. Commerce St. San Antonio TX 78207			TE; ZIP CODE		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NU (210) 347-03		EXTENS	SION	Date Hand-delivered	l or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS / MR FIR Mr Mid	ST chael	N	ЛΙ	Receipt #	Amount \$
NAME	NICKNAME LAS		 S		Date Processed 4/27/2025 1:09:3	5PM
	Bel	ldon			Date Imaged	v
7 CAMPAIGN TREASURER ADDRESS (Residence or Business) 8 CAMPAIGN TREASURER PHONE	STREET ADDRESS (NO PO BO 4 Westelm Circle San Antonio TX 78207 AREA CODE PHONE NU (210) 854-69	MBER	F / SUITE #;		ATE; ZIP CODE	
9 REPORT TYPE	8th Day Before Gener	al Election				
10 PERIOD COVERED	Month Da	ay Year		Month	Day Year	
COVERED	3/25/2	025	THROUGI	H 4/2	23/2025	
11 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 5/3/2025	Primary General	X Runoff Special	Other Description		
12 OFFICE	OFFICE HELD (if any) none			13 OFFICE SOUGHT Mayor	(if known)	
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME				15 Filer ID	C (Ethics Commission Filers)	
Mr Alberto A Altai	Mr Alberto A Altamirano					
16 NOTICE FROM POLITICAL COMMITTEE(S)	COMMITTEES TO SUI THE CANDIDATE'S	PPORT THE CANDIDATE OR OFFICEHOLDER'S		TURES MAY CANDIDATES	OTURES MADE BY POLITICAL HAVE BEEN MADE WITHOUT AND OFFICEHOLDERS ARE	
	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRE	SS			
	SPECIFIC					
Additional Pages		COMMITTEE CAMPA	IGN TREASURER NAME			
		COMMITTEE CAMPA	IGN TREASURER ADDRESS			
17 CONTRIBUTION TOTALS	1. PLEDGES, LO	EMIZED POLITICAL CONT DANS, OR GUARANTEES ONS MADE ELECTRONIC		\$	0	
2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 66145.00				66145.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.		\$	0		
	4. TOTAL POLITICAL EXPENDITURES \$ 385324				385324.10	
CONTRIBUTION BALANCE	5. TOTAL POLIT		MAINTAINED AS OF THE LAST DAY	\$	56240.00	
OUTSTANDING LOAN TOTALS	٥.	CIPAL AMOUNT OF ALL C	OUTSTANDING LOANS AS OF THE	\$	75000.00	
18 AFFIDAVIT						
			I swear, or affirm, under penalty of is true and correct and includes al me under Title 15, Election Code.			
* * * Electronically Certified * * *						
AFFIX NOTARY STAM	D/SEAL AROVE		Signature of Candidat	te or Officeho	older	
AFFIX NOTART STAW	F/SEAL ABOVE					
Sworn to and subscribe				this t	the <u>27th</u> day	
of April ,	20 25 , to certify	which, witness my hand	d and seal of office.			
Signature of officer adn	ninistering oath	Printed name of	officer administering oath	Title	of officer administering oath	

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19	FILER NAME		20 Filer ID (Ethics Com	mission Filers)		
	Mr Alberto A Alta	Iberto A Altamirano				
21	SCHEDULE SUBTO			SUBTOTAL AMOUNT		
1.	X SCHEDUL	E A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 66145.00		
2.	X SCHEDUL	E A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$0		
3.	X SCHEDUL	E B: PLEDGED CONTRIBUTIONS		\$ 0		
4.	X SCHEDUL	X SCHEDULE E: LOANS				
5.	X SCHEDUL	E F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 385324.10		
6.	X SCHEDUL	E F2: UNPAID INCURRED OBLIGATIONS		\$ 0		
7.	X SCHEDUL	E F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION	S	\$0		
8.	X SCHEDUL	E F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0		
9.	X SCHEDUL	E G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$0		
10.	X SCHEDUL	E H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	C/OH	\$0		
11.	X SCHEDUL	E I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	IS	\$ 0		
12.	X	E K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS D TO FILER		\$0		

SCHEDULE A1

	T	he Instruction Guide explains how to com	plete this form.	1 Total pages Schedule A1: 1 of 36
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 3/25/2025	5 Full name of contributor out	t-of-state PAC (ID#)	7 Amount of contribution (\$) 50.00
		6 Contributor address; 3726 Van Dyke Dr San Antonio, TX 78218	City; State; Zip Code	•
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See ins Retired	structions)
	Date 3/25/2025	Full name of contributor	t-of-state PAC (ID#)	Amount of contribution (\$) 10.00
		Contributor address; (12131 orchid blossom San Antonio, TX 78247	City; State; Zip Code	
	Principal occupa Self employed	tion / Job title (See instructions)	Employer (See ins Roxanne barlow	structions)
	Date 3/25/2025	Full name of contributor	t-of-state PAC (ID#)	Amount of contribution (\$) 40.00
		Contributor address; (9123 Redwood Circle Universal City, TX 78148	City; State; Zip Code	
	Principal occupa Graphic design	tion / Job title (See instructions) er	Employer (See ins Firstday foundati	
	Date 3/25/2025	Full name of contributor	t-of-state PAC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; (6) 537 Stonewood Dr San Antonio, TX 78216	City; State; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See ins KinoConstruction	

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SCHEDULE A1

	т	he Instruction Guide explains how to comp	plete this	form.	1 Total pages Schedule A1: 2 of 36
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 3/25/2025	5 Full name of contributor □ out- Dean Hull	of-state PA	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; C 215 E Nottingham Dr San Antonio, TX 78209	City; S	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru Sol Energy Capital I	•
	Date 3/26/2025	Full name of contributor	-of-state PA	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; C 137 Saint Dennis Ave San Antonio, TX 78209	 City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Analyst			Employer (See instru Systems Planning a	•	
	Date 3/26/2025	Full name of contributor	of-state PA	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; C 10101 Reunion PI San Antonio, TX 78216	City; S	State; Zip Code	
	Principal occupa Sandler Coach	tion / Job title (See instructions)		Employer (See instru Sandler	ctions)
	Date 3/26/2025	Full name of contributor	of-state PA	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; C 5719 Nowlands Run Ln Sugar Land, TX 77479	 City; S	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)		Employer (See instru Suchee Studios	ctions)

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SCHEDULE A1

		The Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 3 of 36
2	FILER NAME Mr Alberto A A	Mtamirano		3 Filer ID (Ethics Commission Filers)
4	Date 3/26/2025	5 Full name of contributor Anwar Zahid	te PAC (ID#)	7 Amount of contribution (\$) 1000.00
8	Principal occup Engineer	pation / Job title (See instructions)	9 Employer (See instr infraTECH	ructions)
	Date 3/26/2025	Full name of contributor David Rosen Contributor address; City; 210 E 68th street New York, NY 10065	te PAC (ID#) State; Zip Code	Amount of contribution (\$) 20.00
		nation / Job title (See instructions) c, Global Corporate Affairs	Employer (See instr The Estée Lauder (•
	Date 3/26/2025	Full name of contributor Deborah McNabb Contributor address; City; 2922 Oakleaf Dr. San Antonio, TX 78209	te PAC (ID#) State; Zip Code	Amount of contribution (\$) 100.00
	Principal occup Not employed	pation / Job title (See instructions)	Employer (See instr Not employed	ructions)
	Date 3/27/2025	Full name of contributor Alexander Kamel Contributor address; City; 10902 Memorial Drive Houston, TX 77024	te PAC (ID#) State; Zip Code	Amount of contribution (\$) 1000.00
	Principal occup Attorney	pation / Job title (See instructions)	Employer (See instr Baker Botts LLP	ructions)

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SCHEDULE A1

		The Instruction Guide explains how to com	nplete this	form.	1 Total pages Schedule A1: 4 of 36
2	FILER NAME Mr Alberto A A	Mtamirano			3 Filer ID (Ethics Commission Filers)
4	Date 3/27/2025	5 Full name of contributor	ıt-of-state PA	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; 1100 Louisiana Hoiston, TX 77002	City; S	State; Zip Code	
8	Principal occup Architect	pation / Job title (See instructions)		9 Employer (See instru Page	ctions)
	Date 3/27/2025	Full name of contributor	ıt-of-state PA	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 11000 Equity Drive Houston, TX 77041	City; S	State; Zip Code	
	Principal occup	oation / Job title (See instructions)		Employer (See instru S&P	ctions)
	Date Full name of contributor ☐ out-of-state PAC (ID#) 3/27/2025 Juan Romero		C (ID#)	Amount of contribution (\$) 1000.00	
		Contributor address; 7941 Ridgeview Dr Houston, TX 77055	City; S	State; Zip Code	
	Principal occup Engineer	pation / Job title (See instructions)		Employer (See instru Agha Engineering	ctions)
	Date 3/27/2025	Full name of contributor	it-of-state PA	C (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 4715 Casa Manana San Antonio, TX 78233	City; S	State; Zip Code	
	Principal occup Personal Bank	pation / Job title (See instructions)		Employer (See instru Frost Bank	ctions)

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SCHEDULE A1

	т	he Instruction Guide explains how to compl	ete this form.	1 Total pages Schedule A1: 5 of 36
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 3/27/2025	5 Full name of contributor □ out-of Nasruddin Rupani	-state PAC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; Cit 4726 Devon St Houston, TX 77027	y; State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See instru Worlds Gold & Diar	•
	Date 3/28/2025	Full name of contributor	-state PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; Cit 1619 Chapelwood Ln Richmond, TX 77406	y; State; Zip Code	
, , , , , , , , , , , , , , , , , , , ,			Employer (See instru Kuo & Associates,	
	Date 3/28/2025	Full name of contributor □ out-of John Newman	-state PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; Cit 112 E. Pecan St. San Antonio, TX 78205	y; State; Zip Code	
	Principal occupa Business Analy	ntion / Job title (See instructions)	Employer (See instru Newman Brothers	uctions)
	Date 3/28/2025	Full name of contributor	-state PAC (ID#)	Amount of contribution (\$) 1000.00
		PO Box 12349 San Antonio, TX 78213		
	Principal occupa Not Employed	ation / Job title (See instructions)	Employer (See instru Not Employed	uctions)

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SCHEDULE A1

	т	he Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1: 6 of 36
2	2 FILER NAME Mr Alberto A Altamirano				3 Filer ID (Ethics Commission Filers)
4	Date 3/28/2025	5 Full name of contributor Elizabeth Waller	out-of-state P	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; PO Box 12349 San Antonio, TX 78212	City;	State; Zip Code	
8	Principal occupa Not Employed	tion / Job title (See instructions)		9 Employer (See instru Not Employed	uctions)
	Date 3/28/2025	Full name of contributor Dora A Perez	out-of-state P	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 140 Ross Ave. San Antonio, TX 78225	City;	State; Zip Code	
· · · · · · · · · · · · · · · · · · ·			Employer (See instru	uctions)	
	Date Full name of contributor ☐ out-of-state PAC (ID#) 3/29/2025 Patricia Stout		AC (ID#)	Amount of contribution (\$) 500.00	
		Contributor address; 13406 Orchard Ridge San Antonio, TX 78231	City;	State; Zip Code	
	Principal occupa Business Owne	tion / Job title (See instructions) r		Employer (See instru Alamo Travel	uctions)
	Date 3/29/2025	Full name of contributor Juan Mendez	out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 611 W Levee St Brownsville, TX 78520	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Lawyer Employer (See instructions) Mendez Law Firm				uctions)	

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SCHEDULE A1

	-	The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 7 of 36
2	FILER NAME Mr Alberto A A	Itamirano		3 Filer ID (Ethics Commission Filers)
4	Date 3/30/2025		AC (ID#)	7 Amount of contribution (\$) 1000.00
		105 Blackhawk Trail San Antonio, TX 78232		
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru	uctions)
	Date 3/31/2025	Full name of contributor ut-of-state P Pat Maloney Jr.	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 239 E. Commerce St San Antonio, TX 78205	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru Law Offices of Pat N	•
	Date 3/31/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; City; 36 Vereda Serena Santa Fe, NM 87508	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)
	Date 4/1/2025	Full name of contributor ut-of-state P San Antonio Apartment Association PAC	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 7525 Babcock Rd San Antonio, TX 78249	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru	uctions)

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SCHEDULE A1

	т	he Instruction Guide explains how to co	mplete this	form.	1 Total pages Schedule A1: 8 of 36
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/1/2025	5 Full name of contributor	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; 440 Louisiana Street Houston, TX 77002	City; S		
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru TorVal Law Group, F	•
	Date 4/1/2025	Full name of contributor □ ∘ Jim Palavan	out-of-state P <i>F</i>	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 320 Pinehaven Dr. Houston, TX 77024	City;	State; Zip Code	
				Employer (See instru Geoscience Enginee	•
	Date Full name of contributor □ out-of-state PAC (ID#) 4/1/2025 Andrea Greer		AC (ID#)	Amount of contribution (\$) 100.00	
		Contributor address; 606 Highland Street Houston, TX 77009	City;	State; Zip Code	
	Principal occupa	ntion / Job title (See instructions)		Employer (See instru Andrea Greer Consu	•
	Date 4/2/2025	Full name of contributor	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		9806 Selbourne Lane San Antonio, TX 78215	Oity, C	state, Zip Code	
Principal occupation / Job title (See instructions) SVP of Direct Marketing			Employer (See instru	octions)	

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SCHEDULE A1

	Т	the Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 9 of 36
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/2/2025	5 Full name of contributor □ out-of-star Larry Janak	te PAC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; 19215 Cohen Green Lane Houston, TX 77094	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions) O	9 Employer (See instr IDCUS	uctions)
	Date 4/2/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 1221 McKinney St Houston, TX 77010	State; Zip Code	
	Principal occupa Partner	ation / Job title (See instructions)	Employer (See instr	uctions)
	Date 4/2/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; 830 Rustic Harbor Court Houston, TX 77062	State; Zip Code	
	Principal occupa Self-Employed	ation / Job title (See instructions)	Employer (See instr	uctions)
	Date 4/2/2025	Full name of contributor ☐ out-of-star Patrick Castillo	te PAC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; 21020 Park Row Drive Katy, TX 77449	State; Zip Code	
	Principal occupa President	ation / Job title (See instructions)	Employer (See instr Capital Construction	· ·

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SCHEDULE A1

	Т	he Instruction Guide explains how to	1 Total pages Schedule A1: 10 of 36				
2	FILER NAME Mr Alberto A Al	amirano			3 Filer ID (Ethics Commission Filers)		
4	Date 4/2/2025	5 Full name of contributor Erik Gomez	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 250.00		
		6 Contributor address; 215 W 25th St Houston, TX 77008	City; S	State; Zip Code			
8	Principal occupa Finance	tion / Job title (See instructions)		9 Employer (See instru Bardasz	uctions)		
	Date 4/2/2025	Full name of contributor Michael Marek	out-of-state PA	AC (ID#)	Amount of contribution (\$) 250.00		
		Contributor address; 4032 Rice Blvd Houston, TX 77005	City; S	State; Zip Code			
	Principal occupa Attorney	tion / Job title (See instructions)		Employer (See instru Vinson & Elkins LLI	•		
	Date 4/2/2025	Full name of contributor Robert Siegfried	out-of-state PA	AC (ID#)	Amount of contribution (\$) 1000.00		
		Contributor address; 10238 Wildwood Park Lane Houston, TX 77070	City;	State; Zip Code			
	Principal occupa Engineer	tion / Job title (See instructions)		Employer (See instru Siegfried Engineeri	uctions) ng & Construction, LLC		
	Date 4/2/2025	Full name of contributor Michael Moore	out-of-state PA	AC (ID#)	Amount of contribution (\$) 250.00		
		Contributor address; 4437 Vivian Street Houston, TX 77056	City; S	State; Zip Code			
	Principal occupa Management	tion / Job title (See instructions)		Employer (See instru Uptown	uctions)		

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SCHEDULE A1

	T	The Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 11 of 36
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/2/2025	5 Full name of contributor ☐ out-of-state Parth Gejji	PAC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; City; 1954 Lexington St. Houston, TX 77098	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru Beck Redden LLP	uctions)
	Date 4/2/2025	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; 808 Travis Street Houston, TX 77002	State; Zip Code	
	Principal occupa Chairman	ation / Job title (See instructions)	Employer (See instru BC Global LP	uctions)
	Date 4/2/2025	Full name of contributor		Amount of contribution (\$) 1000.00
		Contributor address; City; 705 Sue St Houston, TX 77009	State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru Harris County	uctions)
	Date 4/2/2025	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; 217 w 25th St Houston, TX 77008	State; Zip Code	
	Principal occupa Developer	ation / Job title (See instructions)	Employer (See instru Lamar Builders	uctions)

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SCHEDULE A1

	т	he Instruction Guide explains how to	1 Total pages Schedule A1: 12 of 36		
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/3/2025	5 Full name of contributor Donald Yarborough	☐ out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 250.00
		6 Contributor address; 1432 Vassar St Houston, TX 77006	City; S	State; Zip Code	
8	 8 Principal occupation / Job title (See instructions) Attorney 9 Employer (See instructions) Foster Yarborough PLLC 				•
	Date 4/3/2025	Full name of contributor Ricardo Romo	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 319 East Nottingham Drive San Antonio, TX 78209	City; S		
			Employer (See instru Not Employed	ctions)	
	Date 4/4/2025	Full name of contributor Justin Hill	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 117 Fox Hall Ln Castle Hills, TX 78213	City; S		
	Principal occupa Attorney	tion / Job title (See instructions)		Employer (See instru Hill Law Firm	ctions)
	Date 4/5/2025	Full name of contributor Dylan Fernandes	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 11 George Street Woods Hole, MA 02543	City; S	State; Zip Code	
	Principal occupa State Senator	tion / Job title (See instructions)		Employer (See instru MA Senate	ctions)

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SCHEDULE A1

	т	he Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 13 of 36
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/5/2025	5 Full name of contributor ☐ out-of-sta Christopher King	te PAC (ID#)	7 Amount of contribution (\$) 25.00
		6 Contributor address; City; 13206 Shorecliff st. San Antonio, TX 78248	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See instr City of Schertz	uctions)
	Date 4/5/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; City; 42 w Cambridge ave Phoenix, AZ 85003	State; Zip Code	
	Principal occupa Organizer	tion / Job title (See instructions)	Employer (See instr Self employed	uctions)
	Date 4/6/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; City; 6935 Bella Verso San Antonio, TX 78256	State; Zip Code	
	Principal occupa	rwriter	Employer (See instr Travelers	uctions)
	Date 4/7/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 5.00
		Contributor address; City; 6020 Danny Kaye Drive San Antonio, TX 78240	State; Zip Code	
	Principal occupa Cashier	ation / Job title (See instructions)	Employer (See instr HEB	uctions)

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SCHEDULE A1

	1	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 14 of 36
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/8/2025	5 Full name of contributor ut-of-state PA Jim Smyle	C (ID#)	7 Amount of contribution (\$) 250.00
		6 Contributor address; City; S 149 E Rosewood Ave San Antonio, TX 78212	State; Zip Code	
8	Principal occupa Consultant	tion / Job title (See instructions)	9 Employer (See instru Self-employed	ctions)
	Date 4/9/2025	Full name of contributor	C (ID#)	Amount of contribution (\$) 50.00
		Contributor address; City; S 930 E Sunshine Dr San Antonio, TX 78228	State; Zip Code	
	Principal occupa Retired	ition / Job title (See instructions)	Employer (See instru UTSA	ctions)
	Date 4/9/2025	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 50 Wincrest Falls Drive Cypress, TX 77429	State; Zip Code	
	Principal occupa Engineer	tion / Job title (See instructions)	Employer (See instru ATSER	ctions)
	Date 4/9/2025	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 5906 Laguna Falls Ct Houston, TX 77041		
	Principal occupa President	ntion / Job title (See instructions)	Employer (See instru OTHON, Inc.	ctions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 15 of 36
2	FILER NAME Mr Alberto A Al	amirano	3 Filer ID (Ethics Commission Filers)
4	Date 4/11/2025	5 Full name of contributor ☐ out-of-state PAC (ID#	7 Amount of contribution (\$) 50.00
		6 Contributor address; City; State; Zi PO Box 830255 San antonio, TX 78283	ip Code
8	Principal occupa Not Employed	, , , , , , , , , , , , , , , , , , , ,	yer (See instructions) nployed
	Date 4/11/2025	Full name of contributor) Amount of contribution (\$) 15.00
		Contributor address; City; State; Zi 7310 S. New Braunfels Ave San Antonio, TX 78223	ip Code
	Principal occupa Not Employed	,	yer (See instructions) nployed
	Date 4/11/2025	Full name of contributor) Amount of contribution (\$) 10.00
		Contributor address; City; State; Zi 3007 Colony Dr San Antonio, TX 78230	ip Code
	Principal occupa Author/Educato	,	yer (See instructions) teracy.com
	Date 4/12/2025	Full name of contributor) Amount of contribution (\$) 1000.00
		Contributor address; City; State; Zi 17850 Juneberry Seed St Hockley, TX 77447	ip Code
	Principal occupa Operations Man	,	yer (See instructions) N

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SCHEDULE A1

	T	he Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 16 of 36
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/12/2025	5 Full name of contributor Yolanda Magallanez	☐ out-of-state P	AC (ID#)	7 Amount of contribution (\$) 50.00
		6 Contributor address; 1014 E Ashley Rd San Antonio, TX 78221	City;	State; Zip Code	
8	Principal occupa Not Employed	ation / Job title (See instructions)		9 Employer (See instru Not Employed	uctions)
	Date 4/12/2025	Full name of contributor Frank Valadez	out-of-state P	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 7719 Lynn Anne Street San Antonio, TX 78240	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed			Employer (See instru Not Employed	uctions)	
Date Full name of contributor ☐ out-of-state PAC (4/12/2025 Mindy Bhutani		AC (ID#)	Amount of contribution (\$) 25.00		
		Contributor address; 3815 Mira Mesa San Antonio, TX 78259	City;	State; Zip Code	
	Principal occupa Not Employed	ation / Job title (See instructions)		Employer (See instru Not Employed	uctions)
	Date 4/13/2025	Full name of contributor Mark Morrison	out-of-state P		Amount of contribution (\$) 20.00
		Contributor address; 5640 Derby Way Bulverde, TX 78163	City;	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)		Employer (See instru Not Employed	uctions)

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SCHEDULE A1

	The Instruction Guide explains how to complete this form.					Total pages Schedule A1: 17 of 36
2	FILER NAME Mr Alberto A Al	tamirano			3	Filer ID (Ethics Commission Filers)
4	Date 4/13/2025	5 Full name of contributor Anthony Vallejo	out-of-state PA	AC (ID#)	7	Amount of contribution (\$) 25.00
		4715 Casa Manana San Antonio, TX 78233				
8	Principal occupa Personal Banke	tion / Job title (See instructions)		9 Employer (See instru Frost Bank	uctio	ons)
	Date 4/14/2025	Full name of contributor Kino Arteaga	out-of-state PA	AC (ID#)		Amount of contribution (\$) 250.00
		Contributor address; 537 Stonewood Dr San Antonio, TX 78216	City;	State; Zip Code		
	Principal occupa	tion / Job title (See instructions)		Employer (See instru KinoConstruction L		ons)
	Date 4/14/2025	Full name of contributor FEPO Machinery INC	out-of-state PA	AC (ID#)		Amount of contribution (\$) 500.00
		Contributor address; 29560 US 281 Edinburg, TX 78541	City;	State; Zip Code		
	Principal occupa Not Employed	tion / Job title (See instructions)		Employer (See instru Not Employed	uctic	ons)
	Date 4/14/2025	Full name of contributor Catherine Meyer	out-of-state PA	AC (ID#)		Amount of contribution (\$) 250.00
		Contributor address; 230 Dwyer Ave San Antonio, TX 78204	City;	State; Zip Code		
	Principal occupa Retired	tion / Job title (See instructions)		Employer (See instru	uctic	ons)

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SCHEDULE A1

	т	he Instruction Guide explains how to complete t	nis form.	1 Total pages Schedule A1: 18 of 36
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/14/2025	5 Full name of contributor ☐ out-of-state Humberto Munguia	PAC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; 7116 S Cage Blvd Pharr, TX 78577	State; Zip Code	
8	Principal occupa Owner	tion / Job title (See instructions)	9 Employer (See instru Pegasus Intertransp	•
	Date 4/14/2025	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 2701 Datil Ave. Mission, TX 78573	State; Zip Code	
			Employer (See instru OHanlon, Demerath	•
Date Full name of contributor □ out-of-state PAC (ID#		PAC (ID#)	Amount of contribution (\$) 50.00	
		Contributor address; City; 114 Camp Street San Antonio, TX 78204	State; Zip Code	
	Principal occupa Not Employed	tion / Job title (See instructions)	Employer (See instru	uctions)
	Date 4/15/2025	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 750.00
		Contributor address; City; 8018 Vanity Hill San Antonio, TX 78256	State; Zip Code	
	Principal occupa Business owne	tion / Job title (See instructions) r	Employer (See instru	uctions)

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SCHEDULE A1

	т	he Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 19 of 36
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/15/2025	5 Full name of contributor Samantha Vandenheuvel	☐ out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; 11054 Vollmer Ln San Antonio, TX 78254	City;	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru Exquisite	ctions)
	Date 4/15/2025	Full name of contributor Rebecca Johnston	out-of-state PA	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 230 Dwyer Ave. San Antonio, TX 78204	City;	State; Zip Code	
	Principal occupation / Job title (See instructions) Retired Employer (See instructions) Self-employed				
	Date 4/15/2025	Full name of contributor Vivienne Bathie	out-of-state PA	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 607 Ivy Ln San Antonio, TX 78209	City;	State; Zip Code	
	Principal occupa Realtor	tion / Job title (See instructions)		Employer (See instru Phyllis Browning Co	•
	Date 4/15/2025	Full name of contributor Chad Belew	□ out-of-state PA	AC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; 410 Pruitt Ave San Antonio, TX 78204	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Employer (S Creative Director Self			Employer (See instru Self	ctions)	

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 20 of 36
2	FILER NAME Mr Alberto A Al	amirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/15/2025	5 Full name of contributor ☐ out-of-state Gilbert Gonzalez	PAC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; 8710 Anton Chico Helotes, TX 78023	State; Zip Code	
8	Principal occupa Lawyer	tion / Job title (See instructions)	9 Employer (See instru SABOR	uctions)
	Date 4/15/2025	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; City; 24719 Buck Creek San Antonio, TX 78255	State; Zip Code	
	Principal occupa Association exe	tion / Job title (See instructions) cutive	Employer (See instru San Antonio Board	•
	Date 4/15/2025	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; City; 305 Goddard Kyle, TX 78640	State; Zip Code	
	Principal occupa Registered Nurs	tion / Job title (See instructions) se	Employer (See instru Kindred	uctions)
	Date 4/16/2025	Full name of contributor	PAC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; City; 7319 Washita Way San Antonio, TX 78256	State; Zip Code	
	Principal occupa Not Employed	tion / Job title (See instructions)	Employer (See instru	uctions)

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SCHEDULE A1

		The Instruction Guide explains how to o	complete this	form.	1 Total pages Schedule A1: 21 of 36	
2	FILER NAME Mr Alberto A A	Altamirano			3 Filer ID (Ethics Commission Filers)	
4	Date 4/16/2025	5 Full name of contributor Elysia Gonzales	out-of-state PA	NC (ID#)	7 Amount of contribution (\$) 1000.00	
		6 Contributor address; 15906 Hachita Blanco Helotes, TX 78023	City; S	State; Zip Code		
8	Principal occup	oation / Job title (See instructions)		9 Employer (See instru Twang Partners, LLC	•	
	Date 4/16/2025	Full name of contributor Carlos R. Leos	out-of-state PA	C (ID#)	Amount of contribution (\$) 50.00	
		Contributor address; 303 East Mistletoe Avenue San Antonio, TX 78212	City; S	State; Zip Code		
	Principal occup Sales	oation / Job title (See instructions)		Employer (See instru Self Employed	actions)	
	Date 4/16/2025	Full name of contributor Quincy Barnes	out-of-state PA	C (ID#)	Amount of contribution (\$) 250.00	
		Contributor address; 6844 San Pedro Ave San Antonio, TX 78216	City; S	State; Zip Code		
	Principal occup President	pation / Job title (See instructions)		Employer (See instructions) Rex Formal Wear		
	Date 4/16/2025	Full name of contributor Karla Alvarado	out-of-state PA	C (ID#)	Amount of contribution (\$) 500.00	
		Contributor address; 633 S Saint Marys Street San Antonio, TX 78205	City; S	State; Zip Code		
		pation / Job title (See instructions)		Employer (See instru HomeNovate LLC	actions)	
			·			

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SCHEDULE A1

	т	he Instruction Guide explains how t	o complete this	form.	1 Total pages Schedule A1: 22 of 36
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/16/2025	5 Full name of contributor Louis Mendoza	out-of-state P/	AC (ID#)	7 Amount of contribution (\$) 25.00
		6 Contributor address; 9605 Hwy 90 West San Antonio, TX 78245	City;	State; Zip Code	
8	Principal occupa Not Employed	ation / Job title (See instructions)		9 Employer (See instru Not Employed	uctions)
	Date 4/16/2025	Full name of contributor Ricardo Romo	out-of-state P	AC (ID#)	Amount of contribution (\$) 200.00
		Contributor address; 319 East Nottingham Drive San Antonio, TX 78209	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed			Employer (See instru Not Employed	uctions)	
Date Full name of contributor ☐ out-of-state PAC (ID#) 4/17/2025 Vaughn Vasconcellos		AC (ID#)	Amount of contribution (\$) 500.00		
		Contributor address; 230 Dwyer Ave San Antonio, TX 78204	City;	State; Zip Code	
	Principal occupa Not Employed	ation / Job title (See instructions)		Employer (See instru Not Employed	uctions)
	Date 4/17/2025	Full name of contributor Alicia Fawcett	Out-of-state P	AC (ID#)	Amount of contribution (\$) 20.00
		Contributor address; 10223 Bull Run San Antonio, TX 78230	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Quality Assurance				Employer (See instru USAA	uctions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to comp	1 Total pages Schedule A1: 23 of 36	
2	FILER NAME Mr Alberto A Al	amirano	3 Filer ID (Ethics Commission Filers)	
4	Date 4/17/2025	Michelle Maloney	of-state PAC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; C 223 Devine st San Antonio, TX 78210	ity; State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See inst	tructions)
	Date 4/18/2025	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; C 135 E Magnolia Ave San Antonio, TX 78212	ity; State; Zip Code	•
	Principal occupa Nonprofit direct	tion / Job title (See instructions) or	Employer (See inst Women's Global C	•
	Date 4/18/2025	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; C 216 Tuttle rd Terrell Hills, TX 78209	ity; State; Zip Code	•
	Principal occupa Nonprofit sales	tion / Job title (See instructions)	Employer (See inst Microsoft	tructions)
	Date 4/18/2025	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; C 1010 Lariat Cove San Antonio, TX 78260	City; State; Zip Code	•
	Principal occupa Realtor	tion / Job title (See instructions)	Employer (See inst Self	tructions)

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SCHEDULE A1

		The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 24 of 36
2	FILER NAME Mr Alberto A A	Itamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/19/2025	5 Full name of contributor ut-of-state Pa	AC (ID#)	7 Amount of contribution (\$) 30.00
		6 Contributor address; City; S 2275 Sharon Road Menlo Park, CA 94025	State; Zip Code	
8	Principal occup Scientist	ation / Job title (See instructions)	9 Employer (See instru Stanford univ	ctions)
	Date 4/19/2025	Full name of contributor ut-of-state Pa	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; City; S 11726 West Ave San Antonio, TX 78216	State; Zip Code	
	Principal occup Photo	ation / Job title (See instructions)	Employer (See instru Photo	ctions)
	Date 4/19/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; City; S 550 Freiling Dr San Antonio, TX 78213	State; Zip Code	
	Principal occup Educator	ation / Job title (See instructions)	Employer (See instru Alamo Colleges / Pa	•
	Date 4/21/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 1405 Wiltshire Ave San Antonio, TX 78209	State; Zip Code	
	Principal occup Venture Capita	ation / Job title (See instructions)	Employer (See instru	ctions)

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SCHEDULE A1

	Т	he Instruction Guide explains how t	1 Total pages Schedule A1: 25 of 36		
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/21/2025	5 Full name of contributor Dennis Martinez	Out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 250.00
		6 Contributor address; 100 W. El Prado Drive San Antonio, TX 78212	City;	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instru	ctions)
	Tax Credits Cor	nsultant		DMAssociates / Par	tner-Crescent Growth Capital
	Date 4/22/2025	Full name of contributor Dania Yvette Gomez	`		Amount of contribution (\$) 1000.00
		Contributor address; 1158 French River Dr. Brownsville, TX 78520	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Employer (See instructions) Self-Employed Self-Employed		ctions)			
	Date 4/22/2025	Full name of contributor Dania Elizabeth Mendoza	out-of-state PA	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 1158 French River Dr. Brownsville, TX 78520	City;		
	Principal occupa Self-Employed	tition / Job title (See instructions)		Employer (See instructions) Self-Employed	
	Date 4/22/2025	Full name of contributor Raul Mendoza	out-of-state PA	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 1158 French River Dr. Brownsville, TX 78520	City;	State; Zip Code	
	Principal occupa Self-Employed	tion / Job title (See instructions)		Employer (See instru Self-Employed	ctions)

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SCHEDULE A1

	т	he Instruction Guide explains how to complete	1 Total pages Schedule A1: 26 of 36	
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/22/2025	5 Full name of contributor ☐ out-of-st. Jorge Humberto Gomez Isassi	ate PAC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; 2655 Meadow Ridge Dr Brownsville, TX 78526	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See instru U.S. Nacy	uctions)
	Date 4/22/2025	Full name of contributor ut-of-st Maria del Rosario Ysassi	ate PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 8302 W Hausman Rd San Antonio, TX 78249	State; Zip Code	
Principal occupation / Job title (See instructions) Sales Associate		Employer (See instru LOreal	uctions)	
	Date 4/22/2025	Full name of contributor	ate PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 8302 W Hausman Rd San Antonio, TX 78249	State; Zip Code	
	Principal occupa Marketing	tion / Job title (See instructions)	Employer (See instru Conzeptos Marketir	*
	Date 4/22/2025	Full name of contributor ut-of-st.	ate PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 308 W Josephine St San Antonio, TX 78212	State; Zip Code	
	Principal occupa Accident Injury	tion / Job title (See instructions) Attorney	Employer (See instru Reynaldo Diaz Acci	uctions) dent Injury Attorney PC

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SCHEDULE A1

	1	he Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1: 27 of 36
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/22/2025	5 Full name of contributor Al Martinez	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; 4110 N Main Street Houston, TX 77009	City;	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instru Business Owner	ictions)
	Date 4/22/2025	Full name of contributor Hector Valdez	out-of-state PA	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 7818 Bantry Ct. San Antonio, TX 78240	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Not Employed		Employer (See instru Not Employed	ictions)		
	Date 4/22/2025	Full name of contributor Anan Qaddumi	`		Amount of contribution (\$) 250.00
		Contributor address; 401 Studewood Houston, TX 77007	City;	State; Zip Code	
	Principal occupa Engineer	ation / Job title (See instructions)		Employer (See instru Interfield	actions)
	Date 4/22/2025	Full name of contributor Jorge Herrera	out-of-state PA	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 1800 west commerce st San Antonio, TX 78207	City; S	State; Zip Code	
	Principal occupa Attorney	ation / Job title (See instructions)		Employer (See instru The herrera law firn	

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete	1 Total pages Schedule A1: 28 of 36	
2	FILER NAME Mr Alberto A Al	amirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	5 Full name of contributor ☐ out-of-star Claudia Olmedo	te PAC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; 11039 N La Homa Rd Mission, TX 78574	State; Zip Code	
8	Principal occupa Self-Employed	tion / Job title (See instructions)	9 Employer (See instr Self-Employed	ructions)
	Date 4/23/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 2954 Weslaco Rd Brownsville, TX 78520	State; Zip Code	
Principal occupation / Job title (See instructions) Self-Employed		tion / Job title (See instructions)	Employer (See instr Self-Employed	ructions)
	Date 4/23/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 1098 Loma Verde Dr. Brownsville, TX 78526	State; Zip Code	
	Principal occupa Self-Employed	tion / Job title (See instructions)	Employer (See instr Self-Employed	ructions)
	Date 4/23/2025	Full name of contributor	te PAC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 14056 Cedar Canyon San Antonio, TX 78231	State; Zip Code	
	Principal occupa Self-Employed	tion / Job title (See instructions)	Employer (See instr Self-Employed	ructions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete this	1 Total pages Schedule A1: 29 of 36	
2	FILER NAME Mr Alberto A Al	amirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	5 Full name of contributor ☐ out-of-state F Roberta Ramirez	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; 2610 Sonora Ave. Mission, TX 78572	State; Zip Code	
8	Principal occupa Self-Employed	tion / Job title (See instructions)	9 Employer (See instru Self-Employed	uctions)
	Date 4/23/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; 14199 N IH 35 Pflugerville, TX 78660	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See instru Peachybbies	uctions)
	Date 4/23/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 1623 Wild Rye Trl. Sugarland, TX 77479	State; Zip Code	
	Principal occupa Not Employed	tion / Job title (See instructions)	Employer (See instru	uctions)
	Date 4/23/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 1904 Wild Rye Trl. Mission, TX 78572	State; Zip Code	
	Principal occupa Transport	tion / Job title (See instructions)	Employer (See instru	uctions)

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SCHEDULE A1

	т	he Instruction Guide explains how t	1 Total pages Schedule A1: 30 of 36		
2	2 FILER NAME Mr Alberto A Altamirano				3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	5 Full name of contributor Oscar Perez	out-of-state P/	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; 105 Bluestar San Antonio, TX 78204	City;	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru Tio Pelon Salsita Inc	•
	Date 4/23/2025	Full name of contributor Ivan Benavidez	out-of-state P/	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 10225 Pinehurst Dr Austin, TX 78848	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Consultant				Employer (See instru Self-Employed	uctions)
	Date 4/23/2025	Full name of contributor Nelly RojasMoreno	Out-of-state PAC (ID#)		Amount of contribution (\$) 250.00
		Contributor address; 6360 Parsley Hill Leon Valley, TX 78238	City;	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)		Employer (See instru	uctions)
	Date 4/23/2025	Full name of contributor Bryan Martin	out-of-state P	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 9815 Wahada Ave San Antonio, TX 78214	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Self employed		Employer (See instructions) Bronko bikes		uctions)	

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SCHEDULE A1

	т	he Instruction Guide explains how to	1 Total pages Schedule A1: 31 of 36		
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	5 Full name of contributor Mylaina Remling	☐ out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 25.00
		6 Contributor address; 9123 Redwood Circle Universal City, TX 78148	City; S	State; Zip Code	
8	Principal occupa Graphic design	ntion / Job title (See instructions) er		9 Employer (See instru Firstday foundation	ctions)
	Date 4/23/2025	Full name of contributor Bethany Stachenfeld	☐ out-of-state PA	NC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 44 East Ave Austin, TX 78701	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Employer (See instructions) Ceo Sendspark					ctions)
	Date 4/23/2025	Full name of contributor Mario Vela	out-of-state PA	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 727 Oban Dr San Antonio, TX 78216	City; S	State; Zip Code	
	Principal occupa Educator	tion / Job title (See instructions)		Employer (See instru Mario Vela	ctions)
	Date 4/23/2025	Full name of contributor MaryEllen Veliz	out-of-state PA	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 130 Shannon Lee San Antonio, TX 78216	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Employer (Se Sales DSPolitical			Employer (See instru DSPolitical	ctions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

	1	The Instruction Guide explains how to co	form.	1 Total pages Schedule A1: 32 of 36	
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	5 Full name of contributor	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 25.00
		6 Contributor address; 7711 Callaghan Rd San Antonio, TX 78229	City; S	State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)		9 Employer (See instru NeuScience, Inc.	ctions)
	Date 4/23/2025	Full name of contributor	out-of-state PA	AC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; 77 12th St NE Atlanta, GA 30309	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Employer (See in Google			Employer (See instru Google	ctions)	
	Date 4/23/2025	Full name of contributor	out-of-state PA	NC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; 701 N. St. Marys Street San Antonio, TX 78205	City; S	State; Zip Code	
	Principal occupa Attorney	ation / Job title (See instructions)		Employer (See instru Self	ctions)
	Date 4/23/2025	Full name of contributor	out-of-state PA	NC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 205 Sheffield Place San Antonio, TX 78213	City; S	State; Zip Code	
Principal occupation / Job title (See instructions) Artist			Employer (See instru Bill Fitzgibbons, LL0	•	

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SCHEDULE A1

	Т	he Instruction Guide explains how to	1 Total pages Schedule A1: 33 of 36		
2	FILER NAME Mr Alberto A Al	tamirano			3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	5 Full name of contributor George Pedraza	out-of-state PA	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; 314 E Rosewood Ave San Antonio, TX 78212	City;	State; Zip Code	
8	Principal occupa Banking	tion / Job title (See instructions)		9 Employer (See instru Bank of America	uctions)
	Date 4/23/2025	Full name of contributor Adriana Garza	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; 35 Sable Heights San Antonio, TX 78258	City;	State; Zip Code	
			Employer (See instru Devoted Care Hosp	•	
	Date Full name of contributor ☐ out-of-state PAC (ID#) 4/23/2025 Uriel Sánchez		AC (ID#)	Amount of contribution (\$) 25.00	
		Contributor address; 15003 Rainy Morning Dr Humble, TX 77346	City;	State; Zip Code	
	Principal occupa Entrepreneur	tion / Job title (See instructions)		Employer (See instru ULinks Group LLC	uctions)
	Date 4/23/2025	Full name of contributor Wayne Alexander	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 250.00
		Contributor address; 2 Lost Timbers San Antonio, TX 78248	City;	State; Zip Code	
, ,			Employer (See instru N /	uctions)	

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	Т	he Instruction Guide explains how to complet	e this form.	1 Total pages Schedule A1: 34 of 36		
2	FILER NAME Mr Alberto A Al	amirano		3 Filer ID (Ethics Commission Filers)		
4	Date 4/23/2025	5 Full name of contributor ☐ out-of-s Joshua Garcia	tate PAC (ID#)	7 Amount of contribution (\$) 25.00		
		6 Contributor address; City 550 Freiling Dr San Antonio, TX 78213	State; Zip Code			
8	Principal occupa Educator	tion / Job title (See instructions)	9 Employer (See instru Alamo Colleges / Pa	*		
	Date 4/23/2025	Full name of contributor	tate PAC (ID#)	Amount of contribution (\$) 250.00		
		Contributor address; City 18206 Mantle Drive San Antonio, TX 78258	State; Zip Code			
		tion / Job title (See instructions) rging Technology & Innovation	Employer (See instru HEB	uctions)		
	Date 4/23/2025	Full name of contributor	tate PAC (ID#)	Amount of contribution (\$) 1000.00		
		Contributor address; City 3006 E Uva Ave Hidalgo, TX 78577	State; Zip Code			
	Principal occupa Self-Employed	tion / Job title (See instructions)	Employer (See instru Self-Employed	uctions)		
	Date 4/23/2025	Full name of contributor	tate PAC (ID#)	Amount of contribution (\$) 1000.00		
		Contributor address; City 4201 Blurr Dr. Edinburg, TX 78542	State; Zip Code			
	Principal occupa Realtor	tion / Job title (See instructions)	Employer (See instru Self-Employed	uctions)		

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	٦	The Instruction Guide explains how to complete this t	orm.	1 Total pages Schedule A1: 35 of 36
2	FILER NAME Mr Alberto A A	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	5 Full name of contributor ut-of-state PA Julio Martinez	C (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; S 3340 Macquarie Dr Edinburg, TX 78542	tate; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instru University of Texas	•
	Date 4/23/2025	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 541 E Hackberry Ave Alamo, TX 79516	tate; Zip Code	
	Principal occupa Self-Employed	ation / Job title (See instructions)	Employer (See instru Self-Employed	ictions)
	Date 4/23/2025	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 4122 S Rhonda St Edinburg, TX 78534	tate; Zip Code	
	Principal occupa Self-Employed	ation / Job title (See instructions)	Employer (See instru Self-Employed	uctions)
	Date 4/23/2025	Full name of contributor	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; S 621 E Nassau Ave McAllen, TX 78501	tate; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instru South Texas College	•

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

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

	Т	he Instruction Guide explains how to complete this	1 Total pages Schedule A1: 36 of 36	
2	FILER NAME Mr Alberto A Al	tamirano		3 Filer ID (Ethics Commission Filers)
4	Date 4/23/2025	Lucero Lucia Rodriguez	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; 901 Salinas Ct Pharr, TX 78577	State; Zip Code	
8	Principal occupa Self-Employed	ation / Job title (See instructions)	9 Employer (See instru Self-Employed	uctions)
	Date 4/23/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 3226 N Victoria Rd. Donna, TX 78537	State; Zip Code	
	Principal occupation / Job title (See instructions) Employer (See instance) Self-Employed Self-Employed		Employer (See instru Self-Employed	ictions)
	Date 4/23/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; City; 1710 Nora Dr. Edinburg, TX 78539	State; Zip Code	
	Principal occupa Self-Employed	tion / Job title (See instructions)	Employer (See instru Self-Employed	ictions)
	Date 4/23/2025	Full name of contributor	AC (ID#)	Amount of contribution (\$) 25.00
		Contributor address; City; 930 E Sunshine Dr San Antonio, TX 78228	State; Zip Code	
	Principal occupa Retired	tion / Job title (See instructions)	Employer (See instru UTSA	ictions)

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

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	The Instruction Guide explains how to complete this form.	1 Tota	al pages Schedule A2: f 1		
2	FILER NAME Mr Alberto A Altamirano	3 File	r ID (Ethics Commission Filers)		
4	TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS	\$ 0			
5	Date 6 Full name of contributor out-of-state PAC (ID#	• Code 9 In-kii	unt of Contribution \$		
10	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		ck if travel outside of Texas, complete Schedule T I-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 contribute	or's spouse (if any) (FOR JUDICIAL)		
16	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	Date Full name of contributor out-of-state PAC (ID#_ Contributor address; City; State; Zi	Code	unt of Contribution \$		
	Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		ck if travel outside of Texas, complete Schedule T I-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 contribute	or's spouse (if any) (FOR JUDICIAL)		
	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	ATTACH ADDITIONAL CODIES OF T	UC COLLEDIU E AC NE	EDED		

Forms provided by Texas Ethics Commission

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

PLEDGED CONTRIBUTIONS

SCHEDULE B

	1	The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1 of 1
2	FILER NAME Mr Alberto A	A Altamirano		3 Filer ID (Ethics Commission Filers)
4	TOTAL OF U	JNITEMIZED PLEDGES		\$ 0
5	Date	6 Full name of pledgor out-of-state PAC (ID# 7 Pledgor address; City; State; Zip Code)	8 Amount of Pledge \$ 9 In-kind contribution description
10	Principal occu	pation / Job title (See instructions)	mployer (Se	Check if travel outside of Texas, complete Schedule Tee instructions)
	Date	Full name of pledgor out-of-state PAC (ID# Pledgor address; City; State; Zip Code		Amount of Pledge \$
	Principal occu	pation / Job title (See instructions)	imployer (Se	Check if travel outside of Texas, complete Schedule T
	Date	Full name of pledgor out-of-state PAC (ID# Pledgor address; City; State; Zip Code		Amount of Pledge \$ In-kind contribution description
	Principal occu	pation / Job title (See instructions)	mployer (Se	Check if travel outside of Texas, complete Schedule Tee instructions)
	Date	Full name of pledgor out-of-state PAC (ID#)	Amount of Pledge \$
	Principal occu	pation / Job title (See instructions)	mployer (Se	Check if travel outside of Texas, complete Schedule Tee instructions)
		ATTACH ADDITIONAL CODIES OF THIS SO	CHEDIN	AS NEEDED
		ATTACH ADDITIONAL COPIES OF THIS SO	CUENOFF	AS NEEDED

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

LOANS SCHEDULE E

The	e Instruction Guide explains how to complete th	his form.	1 Total pages Schedule E: 1 of 1
2 FILER NAME Mr Alberto A Altan	nirano		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITER	MIZED LOANS		\$ 0
5 Date of loan 4/14/2025	7 Name of lender out-of-sta Mr Alberto Altamirano	ate PAC (ID#)	9 Loan Amount (\$) 50000.00
6 Is lender a financial institution?	8 Lender address; City; State 2003 W. Commerce St. San Antonio TX 78207	e; Zip Code	10 Interest rate 0.000000 11 Maturity date
12 Principal occupation /	/ Job title (See instructions)	13 Employer (See instructions) Irys	
14 Description of Collate X none	ral	15 X Check if personal funds waccount (See instructions	vere deposited into political
16 GUARANTOR INFORMATION 17 Name of guarantor 18 Guarantor address; City; State; Zip Code			19 Amount Guaranteed (\$) 0.00
20 Principal occupation ((See instructions)	21 Employer (See instructions)	
Date of loan 4/16/2025	Name of lender out-of-sta	ate PAC (ID#)	Loan Amount (\$) 25000.00
Is lender a financial institution?	Lender address; City; State 2003 W. Commerce St. San Antonio TX 78207	e; Zip Code	Interest rate 0.000000 Maturity date
Principal occupation /	Job title (See instructions)	Employer (See instructions) Irys	
Description of Collate X none	ral	Check if personal funds waccount (See Instructions	vere deposited into political
GUARANTOR INFORMATION X not applicable	Name of guarantor	e; Zip Code	Amount Guaranteed (\$) 0.00
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

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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Travel Out Of District

Candidate/Officeholder/Political (Credit Card Payment	Committee Legal Services Salaries The Instruction Guide explains how to comp	//Wages/Contract Labor Other (enter a category not listed above) plete this form
1 Total pages Schedule F1: 1 of 50	2 FILER NAME Mr Alberto A Altamirano	3 Filer ID (Ethics Commission Filers)
4 Date 3/25/2025	5 Payee name Google Ads	
6 Amount (\$) 500.00	7 Payee address; City; State; Zip of 1600 Amphitheatre Parkway Mountain View , CA 94043	Code
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Advertising Expense	(b) Description Digital Ads
	(c) Check if travel outside of Texas, complete schedule	T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/0		Office sought Office held Mayor
Date 3/26/2025	Payee name Square Space	
Amount (\$) 4.03	Payee address; City; State; Zip 9 8 Clarkson St New York , NY 10014	Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description Software Subscription
	Check if travel outside of Texas, complete schedule	T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/0		Office sought Office held Mayor
Date 3/26/2025	Payee name Sign Busters	
Amount (\$) 4440.00	Payee address; City; State; Zip of PO Box 241018 San Antonio, TX 78224	Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Yard Signs
	Check if travel outside of Texas, complete schedule	T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/0		Office sought Office held Mayor
	ATTACH ADDITIONAL CODIES OF THIS SO	PUEDIN E AS NEEDED

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees COMMENT FEES	oan Repayment/Reimbursement office Overhead/Rental Expense olling Expense rinting Expense alaries/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:	The Instruction Guide explains how to 2 FILER NAME	complete this form	3 Filer ID (Ethics Commission Filers)
2 of 50	Mr Alberto A Altamirano		,
4 Date 3/27/2025	5 Payee name Shopify Inc		
6 Amount (\$) 41.58	7 Payee address; City; State; 33 New Montgomery St #750 San Francisco, CA 94105	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedules Fees	(b) Description Credit Card Proc	cessing Fees
EXI ENDITORE	(c) Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/27/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; State; 1600 Amphitheatre Parkway Mountain View , CA 94043	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schede Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/27/2025	Payee name Frost Bank		
Amount (\$) 5.00	Payee address; City; State; 110 Austin Hwy San Antonio, TX 78209	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schede Fees	Description Credit Card Proc	cessing Fees
	Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEED	ED

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGO Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense ommittee Legal Services The Instruction Guide explains	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)
1 Total pages Schedule F1: 3 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/27/2025	5 Payee name Frost Bank		
6 Amount (\$) 1000.00	7 Payee address; City; St 110 Austin Hwy San Antonio, TX 78209	tate; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of th Accounting/Banking	(b) Description Refund	
EXPENDITURE	(c) Check if travel outside of Texas, comp	lete schedule T Check if A	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 3/28/2025	Payee name A I Mighty LLC		
Amount (\$) 3000.00	Payee address; City; St 11891 E Loop 1604 N Apt 7203 San Antonio , TX 78148	tate; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of th Salaries/Wages/Contract Labor	Description Campaign Canva	sser
	Check if travel outside of Texas, comp	lete schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 3/28/2025	Payee name Crystal Serrano		
Amount (\$) 1080.00	Payee address; City; St 211 Cantrell Dr San Antonio , TX 78221	tate; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of th Salaries/Wages/Contract Labor	Description Campaign Canva	sser
	Check if travel outside of Texas, comp	lete schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES C	OF THIS SCHEDULE AS NEEDE	ED .

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor o complete this form	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: 4 of 50	2 FILER NAME Mr Alberto A Altamirano	•	3 Filer ID (Ethics Commission Filers)			
4 Date 3/28/2025	5 Payee name Addison Mata					
6 Amount (\$) 310.00	7 Payee address; City; State; Zip Code					
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this scheen Salaries/Wages/Contract Labor	(b) Description Campaign Canva	asser			
	(c) Check if travel outside of Texas, complete sc	hedule T Check if	Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held			
Date 3/28/2025	Payee name Gabrien Gregory					
Amount (\$) 220.00	Payee address; City; State; 1806 Town Oak Dr San Antonio , TX 78232	Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheen Salaries/Wages/Contract Labor	Description Campaign Canva	asser			
	Check if travel outside of Texas, complete sc	hedule T Check if	Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held			
Date 3/28/2025	Payee name CSG Inc					
Amount (\$) 1250.00	Payee address; City; State; 212 W Laurel San Antonio , TX 78212	Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheen Consulting Expense	Description Campaign Const	uting			
	Check if travel outside of Texas, complete sc	hedule T Check if	Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held			
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEED!	ED			

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)		
1 Total pages Schedule F1: 5 of 50	2 FILER NAME Mr Alberto A Altamirano	TO COMPLETE WITE TOTAL	3 Filer ID (Ethics Commission Filers)		
4 Date 3/28/2025	5 Payee name Christina Leal				
6 Amount (\$) 315.00	7 Payee address; City; State; 13138 Hunters Spring St San Antonio , TX 78230	Zip Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	Campaign Canva			
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete : Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held		
Date 3/28/2025	Payee name Christopher Perez				
Amount (\$) 50.00	Payee address; City; State; 815 Wilshire Ave San Antonio , TX 78209	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule Salaries/Wages/Contract Labor	Description Campaign Canva	asser		
	Check if travel outside of Texas, complete :	schedule T Check if	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held		
Date 3/28/2025	Payee name Cristian Garza				
Amount (\$) 290.00	Payee address; City; State; 4611 Guadalajara Drive San Antonio, TX 78233	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sci Salaries/Wages/Contract Labor	Description Campaign Canva	isser		
	Check if travel outside of Texas, complete	schedule T Check if	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held		
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEED!	ED .		

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORIE Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)
1 Total pages Schedule F1: 6 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2025	5 Payee name Hudson Locke		
6 Amount (\$) 645.00	7 Payee address; City; State; 13602 Bridgeview San Antonio, TX 78247	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	(b) Description Campaign Canva	sser
EXI ENDITORE	(c) Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 3/28/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; State; 1600 Amphitheatre Parkway Mountain View , CA 94043	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 3/28/2025	Payee name Kimberly Hurst		
Amount (\$) 440.00	Payee address; City; State; 8527 Parthenon PI Universal City, TX 78184	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	Description Campaign Canva	sser
	Check if travel outside of Texas, complete s	chedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TI	HIS SCHEDULE AS NEEDE	ED .

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan 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)
1 Total pages Schedule F1: 7 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2025	5 Payee name Abel Jaimes		
6 Amount (\$) 190.00	7 Payee address; City; State; 522 Dooley Rd Fredericksburg , TX 78624	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	(b) Description Campaign Canva	isser
	(c) Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Mayor	Office held
Date 3/28/2025	Payee name Grecia Lord		
Amount (\$) 625.00	Payee address; City; State; 15027 Northern Dancer San Antonio , TX 78284	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Description Campaign Canva	isser
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/28/2025	Payee name Soren Vaughn		
Amount (\$) 590.00	Payee address; City; State; 315 Thorman PI San Antonio , TX 78209	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Description Campaign Canva	isser
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L. Fees C Food/Beverage Expense P Gifts/Awards/Memorials Expense P	oan Repayment/Reimbursement office Overhead/Rental Expense olling Expense rinting Expense alaries/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: 8 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2025	5 Payee name Mario Castillo		
6 Amount (\$) 565.00	7 Payee address; City; State; 24822 Cooper Valley San Antonio , TX 78255	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schede Salaries/Wages/Contract Labor	(b) Description Campaign Canva	asser
	(c) Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 3/28/2025	Payee name Victoria Pfau		
Amount (\$) 3284.75	Payee address; City; State; 122 Roy Smith St San Antonio , TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schede Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/28/2025	Payee name Carlie Wieman		
Amount (\$) 690.00	Payee address; City; State; 123 Pennock PI Media , PA 19063	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schede Salaries/Wages/Contract Labor	Description Campaign Canva	esser
	Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	oan Repayment/Reimbursement office Overhead/Rental Expense olling Expense rinting Expense alaries/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: 9 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2025	5 Payee name Cole Bowles		
6 Amount (\$) 1568.89	7 Payee address; City; State; 1150 N Loop W San Antonio , TX 78248	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	(b) Description Campaign Canva	isser
	(c) Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/28/2025	Payee name Andrew Solano		
Amount (\$) 3333.00	Payee address; City; State; 14056 Cedar Canyon San Antonio , TX 78231	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	ule) Description Campaign Canva	isser
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/28/2025	Payee name Matthew Tobar		
Amount (\$) 1230.00	Payee address; City; State; 15102 Morning Tree St San Antonio , TX 78232	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Description Campaign Canva	isser
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F1

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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:	2 FILER NAME Mr Alberto A Altamirano	μ	3 Filer ID (Ethics Commission Filers)
4 Date 3/28/2025	5 Payee name Pizza Patron		
6 Amount (\$) 78.00	7 Payee address; City; State; 827 S. Zarazamora St. San Antonio, TX 78207	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Food/Beverage Expense	Event Food	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 3/28/2025	Payee name Brandon Murillo		
Amount (\$) 600.00	Payee address; City; State; 403 N General McMullen Dr Apt 203 San Antonio , TX 78237	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	edule) Description Campaign Canva	asser
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/28/2025	Payee name Colby Murillo		
Amount (\$) 600.00	Payee address; City; State; 403 N General McMullen Dr Apt 203 San Antonio , TX 78237	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	Description Campaign Canva	isser
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TI	HIS SCHEDULE AS NEEDI	ED .

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EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)
1 Total pages Schedule F1:	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/2025	5 Payee name El Paraiso Paletas		
6 Amount (\$) 40.26	7 Payee address; City; State; 1934 Fredericksburg Rd. San Antonio, TX 78201	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Food/Beverage Expense	(b) Description Campaign Meal	
	(c) Check if travel outside of Texas, complete so	chedule T Check if A	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Mayor	Office held
Date 3/31/2025	Payee name Maxi Mart		
Amount (\$) 12.39	Payee address; City; State; 1626 Guadalupe St. San Antonio, TX 78207	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 3/31/2025	Payee name Poetic Republic		
Amount (\$) 75.00	Payee address; City; State; 2330 S. Presa St. San Antonio, TX 78210	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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:	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/2025	5 Payee name The Original Donut Shop		
6 Amount (\$) 126.65	7 Payee address; City; State; 3307 Fredericksburg Rd. San Antonio, TX 78201	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Food/Beverage Expense	Event Food	
9 Complete ONLY if direct expenditure to benefit C/C	(c) Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 3/31/2025	Payee name The Original Donut Shop		
Amount (\$) 126.65	Payee address; City; State; 3307 Fredericksburg Rd. San Antonio, TX 78201	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 3/31/2025	Payee name Cash App		
Amount (\$) 195.00	Payee address; City; State; 1955 Broadway Oakland , CA 94612	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this school Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEEDI	ED

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Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGOR Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains h	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)
1 Total pages Schedule F1: 13 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/2025	5 Payee name Google Ads		
6 Amount (\$) 500.00	7 Payee address; City; Sta 1600 Amphitheatre Parkway Mountain View , CA 94043	te; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this Other: Advertising Expense	schedule) (b) Description Digital Ads	
EXPENDITORE	(c) Check if travel outside of Texas, comple	te schedule T Check if /	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 3/31/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; Sta 1600 Amphitheatre Parkway Mountain View , CA 94043	te; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this Other: Advertising Expense	schedule) Description Digital Ads	
	Check if travel outside of Texas, comple	te schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 3/31/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; Sta 1600 Amphitheatre Parkway Mountain View , CA 94043	te; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this Other: Advertising Expense	schedule) Description Digital Ads	
	Check if travel outside of Texas, comple	te schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDE	ED .

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)
1 Total pages Schedule F1:	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 3/31/2025	5 Payee name Google Ads		L
6 Amount (\$) 500.00	7 Payee address; City; State; 1600 Amphitheatre Parkway Mountain View , CA 94043	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Advertising Expense	(b) Description Digital Ads	
	(c) Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/1/2025	Payee name Numero Inc		
Amount (\$) 675.00	Payee address; City; State; 695 Town Center Dr #580 Costa Mesa, CA 92626	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Solicitation/Fundraising Expense	Description Software Subscr	iption
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/1/2025	Payee name BILL MILLER BAR B Q		
Amount (\$) 18.08	Payee address; City; State; 2823 W. Commerce St. San Antonio, TX 78207	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Food/Beverage Expense	Description Campaign Meal	
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
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Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGOR Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense ommittee Legal Services The Instruction Guide explains he	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)
1 Total pages Schedule F1: 15 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/1/2025	5 Payee name Victoria Pfau		
6 Amount (\$) 78.21	7 Payee address; City; Stat 122 Roy Smith St. Apt 422 San Antonio , TX 78215	e; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this Salaries/Wages/Contract Labor	(b) Description Campaign Canva	sser
EXPENDITURE	(c) Check if travel outside of Texas, complet	e schedule T Check if A	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/2/2025	Payee name CAMP OUTPOST		
Amount (\$) 63.29	Payee address; City; Stat 1811 S. Alamo St. San Antonio, TX 78204	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this Food/Beverage Expense	Description Campaign Meal	
	Check if travel outside of Texas, complet	e schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/2/2025	Payee name Google Ads		
Amount (\$) 224.00	Payee address; City; Stat 1600 Amphitheatre Parkway Mountain View , CA 94043	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complet	e schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORI Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains ho	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)
1 Total pages Schedule F1: 16 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/2/2025	5 Payee name Frost Bank		
6 Amount (\$) 27.30	7 Payee address; City; State 110 Austin Hwy San Antonio, TX 78209	; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this so Fees	(b) Description Credit Card Proc	essing Fees
EXPENDITORE	(c) Check if travel outside of Texas, complete	schedule T Check if /	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 4/3/2025	Payee name Park whiz		
Amount (\$) 25.30	Payee address; City; State 129 Soledad St San Antonio, TX 78205	; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this so Other: Parking	Description Parkwhiz	
	Check if travel outside of Texas, complete	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 4/3/2025	Payee name Gusto Inc		
Amount (\$) 265.43	Payee address; City; State 525 20th St San Francisco , CA 94107	; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this so Salaries/Wages/Contract Labor	Description Campaign Canva	isser
	Check if travel outside of Texas, complete	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEED!	E D

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORIE Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)
1 Total pages Schedule F1: 17 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/3/2025	5 Payee name PETES TAKO HOUSE		
6 Amount (\$) 20.70	7 Payee address; City; State; 502 Brooklyn Ave. San Antonio, TX 78215	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Food/Beverage Expense	(b) Description Event Food	
LAFENDITORE	(c) Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 4/3/2025	Payee name SCALE TO WIN		
Amount (\$) 1343.33	Payee address; City; State; 13742 Harper St. Santa Ana, CA 92703	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Solicitation/Fundraising Expense	Description Software Subscri	iption
	Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/3/2025	Payee name Starbucks Inc		
Amount (\$) 4.60	Payee address; City; State; 12003 NW Military Hwy San Antonio, TX 78231	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EVENDITURE CATECORI	EC EOD BOY 0(-)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORI Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense ommittee Legal Services The Instruction Guide explains ho	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)
1 Total pages Schedule F1: 18 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/4/2025	5 Payee name DEUXSOUTH CREATIVE		
6 Amount (\$) 400.00	7 Payee address; City; State 446 Avant Ave San Antonio, TX 78210	; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this so Other: Advertising Expense		leography/Photography
EXI ENDITORE	(c) Check if travel outside of Texas, complete	schedule T Check if A	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/4/2025	Payee name FRANKS Pizza		
Amount (\$) 22.50	Payee address; City; State 417 Travis St. Houston , TX 77002	; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this so Food/Beverage Expense	Description Campaign Meal	
	Check if travel outside of Texas, complete	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 4/4/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; State 1600 Amphitheatre Parkway Mountain View , CA 94043	; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this so Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDE	ED

SCHEDULE F1

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)
1 Total pages Schedule F1:	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/2025	5 Payee name Facebook Inc		
6 Amount (\$) 2.00	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this school Other: Advertising Expense	(b) Description Digital Ads	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 2.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this school Other: Advertising Expense	edule) Description Digital Ads	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 2.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this school Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED

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Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGOR Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains he	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)
1 Total pages Schedule F1: 20 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/2025	5 Payee name Facebook Inc		
6 Amount (\$) 2.00	7 Payee address; City; State 1 Hacker Way Menlo Park, CA 94025	e; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this something Expense	(b) Description Digital Ads	
EXPENDITORE	(c) Check if travel outside of Texas, complet	e schedule T Check if A	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 3.00	Payee address; City; State 1 Hacker Way Menlo Park, CA 94025	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete	e schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 5.00	Payee address; City; State 1 Hacker Way Menlo Park, CA 94025	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete	e schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEED!	E D

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)
1 Total pages Schedule F1: 21 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/2025	5 Payee name Facebook Inc		
6 Amount (\$) 7.97	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Other: Advertising Expense	(b) Description Digital Ads	
9 Complete ONLY if direct expenditure to benefit C/C	(c) Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 8.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 8.01	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDI	ED .

SCHEDULE F1

	EXPENDITURE CATEGORIE	ES FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)
1 Total pages Schedule F1: 22 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/2025	5 Payee name Facebook Inc		
6 Amount (\$) 12.00	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Other: Advertising Expense	(b) Description Digital Ads	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 18.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 27.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDI	ED .

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SCHEDULE F1

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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: 23 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/7/2025	5 Payee name Facebook Inc		
6 Amount (\$) 30.00	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Other: Advertising Expense	(b) Description Digital Ads	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/7/2025	Payee name Facebook Inc		
Amount (\$) 33.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/7/2025	Payee name Starbucks Inc		
Amount (\$) 10.72	Payee address; City; State; 12003 NW Military Hwy San Antonio, TX 78231	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDI	ED

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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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: 24 of 50	2 FILER NAME Mr Alberto A Altamirano	·	3 Filer ID (Ethics Commission Filers)
4 Date 4/7/2025	5 Payee name Squarespace Inc		
6 Amount (\$) 440.00	7 Payee address; City; State; 8 Clarkson St New York , NY 10014	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Solicitation/Fundraising Expense	Software Subscr	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/7/2025	Payee name TANDEM Coffee		
Amount (\$) 178.34	Payee address; City; State; 310 Riverside Dr. San Antonio, TX 78210	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/7/2025	Payee name Marta Chavez		
Amount (\$) 440.00	Payee address; City; State; 414 W Andrews St Alton , TX 78573	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEG Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense ommittee Legal Services The Instruction Guide explains	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)
1 Total pages Schedule F1: 25 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/8/2025	5 Payee name Squarespace Inc		
6 Amount (\$) 0.76	7 Payee address; City; S 8 Clarkson St New York , NY 10014	tate; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of the Solicitation/Fundraising Expense		iption
EXPENDITORE	(c) Check if travel outside of Texas, comp	olete schedule T Check if A	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/8/2025	Payee name CAMP OUTPOST		
Amount (\$) 61.64	Payee address; City; S 1811 S. Alamo St. San Antonio, TX 78204	tate; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of the Food/Beverage Expense	Description Campaign Meal	
	Check if travel outside of Texas, comp	olete schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/8/2025	Payee name CANVA Inc.		
Amount (\$) 30.00	Payee address; City; S 200 E 6th St #200 Austin , TX 78701	tate; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of the Control of the Control of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the top of the Category (See categories listed at the Categori	Description Software Subscr	iption
	Check if travel outside of Texas, comp	olete schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES (OF THIS SCHEDULE AS NEED!	E D

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense I Fees Gifts/Awards/Memorials Expense I	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)
1 Total pages Schedule F1: 26 of 50	2 FILER NAME Mr Alberto A Altamirano	·	3 Filer ID (Ethics Commission Filers)
4 Date 4/8/2025	5 Payee name Mailchimp Inc		
6 Amount (\$) 410.41	7 Payee address; City; State; 405 N Angier Ave NE Atlanta, GA 30308	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Solicitation/Fundraising Expense	(b) Description Software Subscr	iption
	(c) Check if travel outside of Texas, complete sol	hedule T Check if A	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Mayor	Office held
Date 4/8/2025	Payee name NOLA Brunch		
Amount (\$) 216.50	Payee address; City; State; 1101 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Food/Beverage Expense	dule) Description Event Food	
	Check if travel outside of Texas, complete sci	hedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/8/2025	Payee name SHOTGUN House		
Amount (\$) 16.88	Payee address; City; State; 1333 Buena Vista St. San Antonio, TX 78207	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete sci	hedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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: 27 of 50	2 FILER NAME Mr Alberto A Altamirano	, p	3 Filer ID (Ethics Commission Filers)
4 Date 4/8/2025	5 Payee name Facebook Inc		
6 Amount (\$) 37.00	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Other: Advertising Expense	(b) Description Digital Ads	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Check if Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/8/2025	Payee name Facebook Inc		
Amount (\$) 41.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/8/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; State; 1600 Amphitheatre Parkway Mountain View , CA 94043	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TI	HIS SCHEDULE AS NEED	ED

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees (Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan 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)
1 Total pages Schedule F1: 28 of 50	2 FILER NAME Mr Alberto A Altamirano	o complete this form	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name		
4/8/2025	NGP VAN	7: 0 .	
6 Amount (\$) 533.00	7 Payee address; City; State; 10801 N Mopac Expressway #300 Austin , TX 78759	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Solicitation/Fundraising Expense	(b) Description Software Subscr	ription
	(c) Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/9/2025	Payee name Frost Bank		
Amount (\$) 30.00	Payee address; City; State; 110 Austin Hwy San Antonio, TX 78209	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched	Description Credit Card Proc	cessing Fees
EXI ENDITORE	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/9/2025	Payee name Frost Bank		
Amount (\$) 30.00	Payee address; City; State; 110 Austin Hwy San Antonio, TX 78209	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Fees	Description Credit Card Proc	cessing Fees
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEED	ED

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORIE Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)
1 Total pages Schedule F1: 29 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2025	5 Payee name Facebook Inc		
6 Amount (\$) 46.00	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Other: Advertising Expense	(b) Description Digital Ads	
EXI ENDITORE	(c) Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/9/2025	Payee name Facebook Inc		
Amount (\$) 51.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/9/2025	Payee name JTX Strategies Inc		
Amount (\$) 2500.00	Payee address; City; State; PO Box 152637 Austin, TX 78715	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Consulting Expense	Description Campaign Consu	ulting
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDI	ĒD

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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:	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/9/2025	5 Payee name JTX Strategies Inc		
6 Amount (\$) 31500.00	7 Payee address; City; State; PO Box 152637 Austin, TX 78715	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Consulting Expense	(b) Description Campaign Consu	ulting
9 Complete ONLY if direct expenditure to benefit C/C	(c) Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/10/2025	Payee name ADOBE Inc.		
Amount (\$) 24.89	Payee address; City; State; 345 Park Ave San Jose , CA 95110	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Solicitation/Fundraising Expense	Description Software Subscri	iption
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/10/2025	Payee name Squarespace Inc		
Amount (\$) 118.21	Payee address; City; State; 8 Clarkson St New York , NY 10014	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Solicitation/Fundraising Expense	Description Software Subscri	iption
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEED!	ED .

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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: 31 of 50	2 FILER NAME Mr Alberto A Altamirano	·	3 Filer ID (Ethics Commission Filers)
4 Date 4/10/2025	5 Payee name Facebook Inc		
6 Amount (\$) 57.00	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Other: Advertising Expense	(b) Description Digital Ads	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Check if Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/11/2025	Payee name Facebook Inc		
Amount (\$) 63.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this school Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name Colby Murillo		
Amount (\$) 1210.00	Payee address; City; State; 403 N General McMullen Dr Apt 203 San Antonio , TX 78237	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TI	HIS SCHEDULE AS NEED!	ED

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)
1 Total pages Schedule F1:	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Brandon Murillo		
6 Amount (\$) 1600.00	7 Payee address; City; State; 403 N General McMullen Dr Apt 203 San Antonio , TX 78237	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Campaign Canva	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete so Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/11/2025	Payee name Victoria Pfau		
Amount (\$) 3047.00	Payee address; City; State; 122 Roy Smith St. Apt 422 San Antonio , TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name Cristian Garza		
Amount (\$) 310.00	Payee address; City; State; 4611 Guadalajara Dr San Antonio , TX 78233	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L. Fees C Food/Beverage Expense P Gifts/Awards/Memorials Expense P	pan Repayment/Reimbursement office Overhead/Rental Expense olling Expense rinting Expense alaries/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: 33 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Joaquin Carranza		
6 Amount (\$) 60.00	7 Payee address; City; State; 414 W Andrews St Alton , TX 78573	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schede Salaries/Wages/Contract Labor	(b) Description Campaign Canva	asser
-	(c) Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Mayor	Office held
Date 4/11/2025	Payee name Julian Sanchez		
Amount (\$) 60.00	Payee address; City; State; 414 W Andrews St Alton , TX 78573	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schede Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/11/2025	Payee name Julianne Pena		
Amount (\$) 180.00	Payee address; City; State; 14056 Cedar Canyon San Antonio , TX 78231	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schede Salaries/Wages/Contract Labor	Description Campaign Canva	esser
	Check if travel outside of Texas, complete sch	edule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan 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)	
1 Total pages Schedule F1: 34 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)	
4 Date 4/11/2025	5 Payee name Lizabeth Alvarez			
6 Amount (\$) 120.00	7 Payee address; City; State; 14056 Cedar Canyon San Antonio , TX 78231	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	(b) Description Campaign Canva	isser	
	(c) Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held	
Date 4/11/2025	Payee name Marcos Elizondo			
Amount (\$) 210.00	Payee address; City; State; 14056 Cedar Canyon San Antonio , TX 78231	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Description Campaign Canva	isser	
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held	
Date 4/11/2025	Payee name San Antonio Express News			
Amount (\$) 19.96	Payee address; City; State; 420 Broadway San Antonio, TX 78205	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Newspaper Subscription	Description SAEN Monthly P	ayment	
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F1

		10 TOD DOY 0/ \	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORIE Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)
1 Total pages Schedule F1: 35 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Selene Garcia Delgado		
6 Amount (\$) 580.00	7 Payee address; City; State; 1444 Steves Ave San Antonio , TX 78210	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	(b) Description Campaign Canva	sser
EXPENDITORE	(c) Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Mayor	Office held
Date 4/11/2025	Payee name A I Mighty LLC		
Amount (\$) 6300.00	Payee address; City; State; 11891 E Loop 1604 N Apt 7203 San Antonio , TX 78148	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	Description Campaign Canva	sser
	Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name Crystal Serrano		
Amount (\$) 1375.00	Payee address; City; State; 211 Cantrell Dr San Antonio , TX 78221	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	Description Campaign Canva	sser
	Check if travel outside of Texas, complete s	schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDE	ED

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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)
1 Total pages Schedule F1: 36 of 50	2 FILER NAME Mr Alberto A Altamirano	•	3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Hudson Locke		
6 Amount (\$) 255.00	7 Payee address; City; State; 13602 Bridgeview San Antonio, TX 78247	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Campaign Canva	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete so Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/11/2025	Payee name Addison Mata		
Amount (\$) 210.00	Payee address; City; State; 22124 Paseo Corto Drive Garden Ridge, TX 78266	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name CSG Inc		
Amount (\$) 1250.00	Payee address; City; State; 212 W Laurel San Antonio , TX 78212	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Consulting Expense	Description Campaign Const	uting
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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:	2 FILER NAME Mr Alberto A Altamirano	•	3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Andrew Solano		
6 Amount (\$) 3333.00	7 Payee address; City; State; 14056 Cedar Canyon San Antonio , TX 78231	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Campaign Canva	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete so Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/11/2025	Payee name Cole Bowles		
Amount (\$) 1500.00	Payee address; City; State; 1150 N Loop W San Antonio , TX 78248	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name Matthew Tobar		
Amount (\$) 950.00	Payee address; City; State; 15102 Morning Tree St San Antonio , TX 78232	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete so	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	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: 38 of 50	2 FILER NAME Mr Alberto A Altamirano	·	3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Kimberly Hurst		
6 Amount (\$) 345.00	7 Payee address; City; State; 8527 Parthenon PI Universal City, TX 78184	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Campaign Canva	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/11/2025	Payee name Carlie Wieman		
Amount (\$) 480.00	Payee address; City; State; 123 Pennock PI Media , PA 19063	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Description Campaign Canva	asser
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; State; 1600 Amphitheatre Parkway Mountain View , CA 94043	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this school Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	chedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGOR Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains ho	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)
1 Total pages Schedule F1: 39 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Gabrien Gregory		
6 Amount (\$) 80.00	7 Payee address; City; State 1806 Town Oak Dr San Antonio , TX 78232	e; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this s Salaries/Wages/Contract Labor	(b) Description Campaign Canva	sser
EXPENDITORE	(c) Check if travel outside of Texas, complete	e schedule T Check if A	Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name Soren Vaughn		
Amount (\$) 1025.00	Payee address; City; State 315 Thorman PI San Antonio , TX 78209	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Salaries/Wages/Contract Labor	chedule) Description Campaign Canva	sser
	Check if travel outside of Texas, complete	e schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held
Date 4/11/2025	Payee name Abel Jaimes		
Amount (\$) 260.00	Payee address; City; State 522 Dooley Rd Fredericksburg , TX 78624	e; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Salaries/Wages/Contract Labor	chedule) Description Campaign Canva	sser
	Check if travel outside of Texas, complete	e schedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDE	ED

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)
1 Total pages Schedule F1:	2 FILER NAME Mr Alberto A Altamirano	·	3 Filer ID (Ethics Commission Filers)
4 Date 4/11/2025	5 Payee name Grecia Lord		
6 Amount (\$) 590.00	7 Payee address; City; State; 15027 Northern Dancer San Antonio , TX 78284	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	Campaign Canva	
9 Complete ONLY if direct expenditure to benefit C/C	Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/14/2025	Payee name Google Ads		
Amount (\$) 500.00	Payee address; City; State; 1600 Amphitheatre Parkway Mountain View , CA 94043	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/14/2025	Payee name Park whiz		
Amount (\$) 21.35	Payee address; City; State; 129 Soledad St San Antonio, TX 78205	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Parking	Description Parkwhiz	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDI	ED

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)
1 Total pages Schedule F1: 41 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/14/2025	5 Payee name Colby Murillo		
6 Amount (\$) 390.00	7 Payee address; City; State; 14056 Cedar Canyon San Antonio , TX 78231	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	(b) Description Campaign Canva	isser
	(c) Check if travel outside of Texas, complete sc	hedule T Check if A	Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/14/2025	Payee name THAI BIRD		
Amount (\$) 62.97	Payee address; City; State; 203 8th St. San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Food/Beverage Expense	Description Event Food	
	Check if travel outside of Texas, complete sc	hedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
Date 4/14/2025	Payee name Facebook Inc		
Amount (\$) 70.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheen Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete sc	hedule T Check if A	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIE	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	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)
1 Total pages Schedule F1: 42 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)
4 Date 4/14/2025	5 Payee name Facebook Inc		
6 Amount (\$) 77.00	7 Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sch Other: Advertising Expense	(b) Description Digital Ads	
9 Complete ONLY if direct expenditure to benefit C/C	(c) Check if travel outside of Texas, complete s Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Austin, TX, officeholder living expense Office held
Date 4/14/2025	Payee name Facebook Inc		
Amount (\$) 85.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH Alberto Altamirano	Office sought Mayor	Office held
Date 4/14/2025	Payee name Facebook Inc		
Amount (\$) 94.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Other: Advertising Expense	Description Digital Ads	
	Check if travel outside of Texas, complete s	schedule T Check if	Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEEDI	ED

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	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)		
1 Total pages Schedule F1: 43 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)		
4 Date 4/14/2025	5 Payee name Facebook Inc				
6 Amount (\$) 104.00	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 sche Other: Advertising Expense	(b) Description Digital Ads			
	(c) Check if travel outside of Texas, complete so	hedule T Check if	Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Mayor	Office held		
Date 4/15/2025	Payee name Facebook Inc				
Amount (\$) 115.00	Payee address; City; State; 1 Hacker Way Menlo Park, CA 94025	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Advertising Expense	Description Digital Ads			
	Check if travel outside of Texas, complete so	hedule T Check if	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held		
Date 4/15/2025	Payee name Starbucks Inc				
Amount (\$) 10.72	Payee address; City; State; 12003 NW Military Hwy San Antonio, TX 78231	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Food/Beverage Expense	Description Event Food			
	Check if travel outside of Texas, complete so	hedule T Check if	Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office sought Mayor	Office held		
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDI	ĒD		

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense By Gifts/Awards/Memorials Expense Printing Expense		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:	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)	
4 Date 4/15/2025	5 Payee name CAMP OUTPOST			
6 Amount (\$) 62.11	7 Payee address; City; State; 1811 S. Alamo St. San Antonio, TX 78204	Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Food/Beverage Expense	(b) Description Campaign Meal		
	(c) Check if travel outside of Texas, complete sol	hedule T Check if A	Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought Mayor	Office held	
Date 4/15/2025	Payee name CSG Inc			
Amount (\$) 4431.00	Payee address; City; State; 212 W Laurel San Antonio , TX 78212	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Consulting Expense	Description Campaign Consu	uting	
	Check if travel outside of Texas, complete sci	hedule T Check if	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held	
Date 4/15/2025	Payee name CSG Inc			
Amount (\$) 31257.50	Payee address; City; State; 212 W Laurel San Antonio , TX 78212	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Consulting Expense	Description Campaign Consu	uting	
	Check if travel outside of Texas, complete sci	hedule T Check if	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held	
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEED!	E D	

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense		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: 45 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)		
4 Date 4/15/2025	5 Payee name CSG Inc				
6 Amount (\$) 47560.00	7 Payee address; City; State; Zip Code 212 W Laurel San Antonio , TX 78212				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense (b) Description Campaign Consuting				
2/4 2/45/10/K2	(c) Check if travel outside of Texas, comple	ete schedule T Check if A	Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held		
Date 4/15/2025	Payee name MBA CONSULTING				
Amount (\$) 1298.09	Payee address; City; Sta 611 Pennsylvania Ave SE #143 Washington, DC 20003	ate; Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of thi Consulting Expense	s schedule) Description Campaign Consu	llting		
	Check if travel outside of Texas, comple	ete schedule T Check if A	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held		
Date 4/15/2025	Payee name MBA CONSULTING				
Amount (\$) 2618.15	Payee address; City; Sta 611 Pennsylvania Ave SE #143 Washington, DC 20003	ate; Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of thi Consulting Expense	s schedule) Description Campaign Consu	llting		
	Check if travel outside of Texas, comple	ete schedule T Check if A	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held		
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NEEDE	ED		

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense		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: 46 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)	
4 Date 4/17/2025	5 Payee name Addison Mata			
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 22124 Paseo Corto Drive Garden Ridge, TX 78266			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Campaign Canvasser			
	(c) Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held	
Date 4/17/2025	Payee name Hudson Locke			
Amount (\$) 250.00	Payee address; City; State; 13602 Bridgeview San Antonio, TX 78247	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Description Campaign Canva	isser	
	Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held	
Date 4/17/2025	Payee name Sara Adams			
Amount (\$) 250.00	Payee address; City; State; 1 Camino Santa Maria San Antonio, TX 78228	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Description Campaign Canva	isser	
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held	
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEED!	E D	

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form		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: 47 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)		
4 Date 4/17/2025	5 Payee name Frost Bank				
6 Amount (\$) 15.00	7 Payee address; City; State; Zip Code 110 Austin Hwy San Antonio, TX 78209				
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Fees (b) Description Credit Card Processing Fees				
EXPENDITURE	(c) Check if travel outside of Texas, complete	e schedule T Check if /	Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held		
Date 4/18/2025	Payee name Gabriela Meija				
Amount (\$) 250.00	Payee address; City; State 1 Camino Santa Maria San Antonio, TX 78228	e; Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Salaries/Wages/Contract Labor	chedule) Description Campaign Canva	isser		
	Check if travel outside of Texas, complete	e schedule T Check if A	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Alberto Altamirano	Office sought Mayor	Office held		
Date 4/21/2025	Payee name Ixchel Mireles				
Amount (\$) 250.00	Payee address; City; State 721 Shasta Ave McAllen , TX 78221	e; Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s Salaries/Wages/Contract Labor	chedule) Description Campaign Canva	isser		
	Check if travel outside of Texas, complete	e schedule T Check if A	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held		
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEED!	E D		

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Exp ommittee Legal Services	Loan Repayment/Reimb Office Overhead/Rental Polling Expense ense Printing Expense Salaries/Wages/Contract plains how to complete this form	Transportation Equipment & Related Expense Travel in District Travel Out Of District Chapter (enter a category not listed above)		
1 Total pages Schedule F1: 48 of 50	2 FILER NAME Mr Alberto A Altamirano 3 Filer ID (Ethics Commission Filers)				
4 Date 4/21/2025	5 Payee name Emilio Orona				
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 1 Camino Santa Maria San Antonio, TX 78228				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Campaign Canvasser				
	(c) Check if travel outside of Texas,	complete schedule T	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder nan	<u> </u>	-		
Date 4/21/2025	Payee name Christian Garza				
Amount (\$) 250.00	Payee address; City; 4611 Guadalajara Dr San Antonio , TX 78233	State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the t Salaries/Wages/Contract Lab		tion ign Canvasser		
	Check if travel outside of Texas	complete schedule T	Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder nam OH Alberto Altamirano	ne Office sough Mayor	nt Office held		
Date 4/21/2025	Payee name CSG Inc				
Amount (\$) 85748.38	Payee address; City; 212 W Laurel San Antonio , TX 78212	State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the t Consulting Expense		tion i gn Consuting		
	Check if travel outside of Texas	complete schedule T	Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/C		ne Office sough Mayor	nt Office held		
	ATTACH ADDITIONAL COP	ES OF THIS SCHEDULE A	S NEEDED		

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense		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: 49 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)			
4 Date 4/22/2025	5 Payee name Frost Bank	·				
6 Amount (\$) 15.00	7 Payee address; City; State; Zip Code 110 Austin Hwy San Antonio, TX 78209					
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Fees (b) Description Credit Card Processing Fees					
EXPENDITURE	(c) Check if travel outside of Texas, complete s	chedule T Check if /	Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held			
Date 4/22/2025	Payee name Marta Chavez					
Amount (\$) 330.00	Payee address; City; State; 14056 Cedar Canyon San Antonio , TX 78231	Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Salaries/Wages/Contract Labor	edule) Description Campaign Canva	sser			
	Check if travel outside of Texas, complete s	chedule T Check if A	Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name OH Alberto Altamirano	Office sought Mayor	Office held			
Date 4/23/2025	Payee name Jaimes Place					
Amount (\$) 46.64	Payee address; City; State; 1514 W. Commerce San Antonio, TX 78207	Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sch Food/Beverage Expense	Description Event Food				
	Check if travel outside of Texas, complete s	chedule T Check if A	Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held			
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE AS NEED!	ED .			

SCHEDULE F1

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense		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: 50 of 50	2 FILER NAME Mr Alberto A Altamirano		3 Filer ID (Ethics Commission Filers)		
4 Date 4/23/2025	5 Payee name Natalia Narvarez				
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 6908 North Loop 1604 San Antonio, TX 78249				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Campaign Canvasser				
	(c) Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held		
Date 4/23/2025	Payee name Melanie Mendez				
Amount (\$) 250.00	Payee address; City; State; 401 San Manuel Ave San Antonio, TX 78237	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Description Campaign Canva	isser		
	Check if travel outside of Texas, complete sch	nedule T Check if	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held		
Date 4/23/2025	Payee name CSG Inc				
Amount (\$) 110626.96	Payee address; City; State; 212 W Laurel San Antonio , TX 78212	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Consulting Expense	Description Campaign Consu	uting		
	Check if travel outside of Texas, complete sch	nedule T Check if A	Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought Mayor	Office held		
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEED!	E D		

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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

Transportation Equipment & Related Expense

Solicitation/Fundraising Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking Advertising Expense

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense	Food/Beverage Expense Polling Expense)	Travel in District	
Contributions/Donations Made By	Gifts/Awards/Memorials Expense Printing Expens		Travel Out Of District	
Candidate/Officeholder/Political Co	ů		Other (enter a category not listed above)	
	The Instruction Guide explains how to compl	ete this form		
1 Total pages Schedule F2:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
1 of 1	Mr Alberto A Altamirano		CT HOLIE (Earlies Commiscion Thors)	
1 01 1	WII Alberto A Altamilano			
4 TOTAL OF UNITEMIZ	ED UNPAID INCURRED OBLIGATIONS		\$ 0	
5 Date	6 Payee name			
7 Amount (\$)	8 Payee address; City; State; Zip Code			
9 TYPE OF EXPENDITURE	Political Non-Political			
10	(a) Category (See categories listed at the top of this schedule)	(b) Description		
PURPOSE				
OF				
EXPENDITURE				
	(c) Check if travel outside of Texas, complete schedule T	Check it	f Austin, TX, officeholder living expense	
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date	Payee name			
Amount (\$)	Payee address; City; State; Zip Code			
TYPE OF	Political Non-Political			
EXPENDITURE				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description		
EVLENDIIOKE			5 A .: TX . 55 . I I I .: :	
	Check if travel outside of Texas, complete schedule T		f Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/C		ce sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS SCHE	DULE AS NFF	DED	
	ATTACH ADDITIONAL COLIEG OF THIS SOIL	- OLL AU NEL		

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

	The Instruction Guide explains how to complete this form.			otal pages Schedule	F3:
2	2 FILER NAME Mr Alberto A Altamirano			ler ID (Ethics Commi	ssion Filers)
4	Date	5 Name of person from whom investment is purchased			
		6 Address of person from whom investment is purchased; City;			Zip Code
		7 Description of investment			
		8 Amount of investment (\$)			
	Date	Name of person from whom investment is purchased			
		Address of person from whom investment is purchased; City;		State;	Zip Code
		Description of investment			
		Amount of investment (\$)			
		ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS N	EEDED	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking Advertising Expense Consulting Expense

Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/Donations Made By Candidate/Officeholder/Political C	·	Printing Expens Salaries/Wages	/Contract Labor	Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F4: 1 of 1	The Instruction Guide explain 2 FILER NAME Mr Alberto A Altamirano	s how to compl	lete this form	3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A CF	REDIT CARD		\$ 0		
5 Date	6 Payee name	6 Payee name				
7 Amount (\$)	8 Payee address; City; State	8 Payee address; City; State; Zip Code				
9 TYPE OF EXPENDITURE	Political Non-Pe	olitical				
10 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this s	schedule)	(b) Description			
	(c) Check if travel outside of Texas, complete	e schedule T	Check	if Austin, TX, officeholder living expense		
11 Complete ONLY if direct expenditure to benefit C/		Offic	ce sought	Office held		
Amount (\$)	Payee address; City; State	e; Zip Code				
TYPE OF EXPENDITURE	Political Non-Po	olitical				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this s	schedule)	Description			
	Check if travel outside of Texas, complete	e schedule T	Check	if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direc expenditure to benefit C/		Offic	ce sought	Office held		
	ATTACH ADDITIONAL COPIES O	F THIS SCHE	EDULE AS NEE	EDED		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a)Event Expense Loan Repayment/Reimbursement

Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense

Solicitation/Fundraising Expense

Transportation Equipment & Related Expense

Travel in District
Travel Out Of District

Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Gitts/Awards/Memorials Expense Printing Expense Travel Out Of District Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form
1 Total pages Schedule G:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1 of 1	Mr Alberto A Altamirano
4 Date	5 Payee Name
6 Amount (\$) Reimbursement from political contributions	7 Payee address; City; State; Zip Code
intended	
PURPOSE OF	(a) Category (See categories listed at the top of this schedule) (b) Description
EXPENDITURE	(c) Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	
Date	Payee name
Amount (\$)	Payee address; City; State; Zip Code
Reimbursement from political contributions intended	
PURPOSE OF	Category (See categories listed at the top of this schedule) Description
EXPENDITURE	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held
Date	Payee name
Amount (\$) Reimbursement from political contributions intended	Payee address; City; State; Zip Code
PURPOSE OF	Category (See categories listed at the top of this schedule) Description
EXPENDITURE	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking Advertising Expense Consulting Expense

Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District

Candidate/Officeholder/Political C	Committee Legal Services Sal	aries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to o	omplete this form	
1 Total pages Schedule H: 1 of 1	2 FILER NAME Mr Alberto A Altamirano		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		
	(c) Check if travel outside of Texas, complete sche	<u> </u>	f Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		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 schedul	e) Description	
	Check if travel outside of Texas, complete sche	dule T Check i	f Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		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 schedul	e) Description	
	Check if travel outside of Texas, complete sche	dule T Check i	f Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED	ED

SCHEDULE

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule I: 1 of 1	2 FILER NAME Mr Alberto A Altamirano	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 1				
2 FILER NAME Mr Alberto A A	3 Filer ID (Ethics Commission Filers)					
4 Date	5 Name of person from whom amount is received	8 Amount (\$)				
	6 Address of person from whom amount is received; City; State;	Zip Code				
	7 Purpose for which amount is received	eck 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	eck 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	eck 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	eck 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 1 of 1	1 Total pages Schedule T: 1 of 1			
2 FILER NAME Mr Alberto A Altamirano			3 Filer ID (Ethics Comm	3 Filer ID (Ethics Commission Filers)			
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee							
5 Contribution / Expendi	ture reported on						
Schedule A2	Schedule	Schedule D	Schedule F1				
Schedule F2	Schedule	F4 Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS		
6 Dates of travel	7 Name of person(s) traveling						
	8 Departure city or name of departure location						
	9 Destination city or name of destination location						
10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)							
Name of Contributor /	Corporation or L	abor Organization / Pledgor / Pa	ayee				
Contribution / Expendi	ture reported on						
Schedule A2	Schedule	B Schedule B(J)	Schedule C2	Schedule D	Schedule F1		
Schedule F2	Schedule	F4 Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS		
Dates of travel	f travel Name of person(s) traveling						
	Departure city or name of departure location						
	Destination of	ity or name of destination locati	on				
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)					
Name of Contributor /	Corporation or L	abor Organization / Pledgor / Pa	ayee				
Contribution / Expendi	ture reported on						
Schedule A2	Schedule	B Schedule B(J)	Schedule C2	Schedule D	Schedule F1		
Schedule F2	Schedule	F4 Schedule G	Schedule H	Schedule COH-UC	Schedule B-SS		
Dates of travel	Ates of travel Name of person(s) traveling Departure city or name of departure location						
	Destination o	ity or name of destination locati	on				
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 Filer ID (Ethics Commission Filers) Mr Alberto A Altamirano **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. .. **CAMPAIGN FUNDS** A. 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. В. **ASSETS** Check only one: I do not retain assets purchased with political contributions or interest or other income from political contributions. I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204. Signature of Candidate **OFFICEHOLDER** .. Complete this section only if you are an officeholder. .. I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, after filing the last required report as an officeholder, I retain political contributions, interest of other income from political contributions, or assets purchased with political contributions or interest or other income from political contributions. Signature of Officeholder