

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 59	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mrs	FIRST Misty	MI D	OFFICE USE ONLY Date Received 5/30/2025 11:51:06AM	
	NICKNAME	LAST Spears	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 780963 San Antonio TX 78278			Date Hand-delivered or Date Postmarked	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (210)	PHONE NUMBER 988-9867	EXTENSION		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Grant	MI	Receipt #	Amount \$
	NICKNAME	LAST Moody	SUFFIX	Date Processed 5/30/2025 11:51:06AM	
	Date Imaged				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE PO Box 780963 San Antonio TX 78278				
8 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 766-7620	EXTENSION		
9 REPORT TYPE	8th Day Before Runoff Election				
10 PERIOD COVERED	Month Day Year 5/3/2025 THROUGH 5/28/2025				
11 ELECTION	ELECTION DATE Month Day Year 6/7/2025		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) Council District 9		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Mrs Misty D Spears	15 Filer ID (Ethics Commission Filers)
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16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE	COMMITTEE NAME	
<input checked="" type="checkbox"/> GENERAL	Better SA PAC	
<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
	3510 N. St. Marys #300 San Antonio TX 78212	
	COMMITTEE CAMPAIGN TREASURER NAME	
	Cabell Hobbs	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	
	PO Box 341027 Austin TX 78734	

☒ Additional Pages

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 47399.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 21538.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 43978.42
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 18117.42

18 AFFIDAVIT

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

*** Electronically Certified ***

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said **Mrs Misty D Spears**, this the **30th** day of **May**, **2025**, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2 - A

The Instruction Guide explains how to complete this form.

1 Total pages:
1 of 1

2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission filers)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

NOTICE
FROM
POLITICAL
COMMITTEE(S)

COMMITTEE TYPE

☒ GENERAL

☐ SPECIFIC

COMMITTEE NAME

San Antonio Equity Alliance

COMMITTEE ADDRESS

PO Box 15751
San Antonio TX 78212

COMMITTEE CAMPAIGN TREASURER NAME

Darryl Byrd

COMMITTEE CAMPAIGN TREASURER ADDRESS

PO Box 15751
San Antonio TX 78212

NOTICE
FROM
POLITICAL
COMMITTEE(S)

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

NOTICE
FROM
POLITICAL
COMMITTEE(S)

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

NOTICE
FROM
POLITICAL
COMMITTEE(S)

COMMITTEE TYPE

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

SUBTOTALS - COH

FORM C/OH COVER SHEET PG 3

19 FILER NAME Mrs Misty D Spears		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 47399.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 21538.70
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input checked="" type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
1 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/4/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Kyle Bolch

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**23538 Seven Winds
San Antonio, TX 78258**

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

9 Employer (See instructions)
USAA

Date
5/4/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
JR Haseloff

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**4320 Laurie Michelle Road
San Antonio, TX 78261**

Principal occupation / Job title (See instructions)
Contract Negotiator

Employer (See instructions)
USAA

Date
5/4/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Roy Brand

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**26210 Lame Beaver
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
cyber security

Employer (See instructions)
Baker Hughes

Date
5/4/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mel and Susan Bayne

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**12 Tanner Woods
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
2 of 36

2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/4/2025

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**8058 Broadway St.
San Antonio, TX 78209**

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

9 Employer (See instructions)
Rova Property Management

Date
5/5/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jennifer Hendrix

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**379 Coggeshall Ln
San Antonio, TX 78257**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Self

Date
5/5/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Viki Melton

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**20623 Wild Springs Dr.
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Broker

Employer (See instructions)
Stone Oak Realty Services

Date
5/5/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Aimee Locke

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**601 Contour Drive
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Na

Employer (See instructions)
na

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
3 of 36

2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/5/2025

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

7 Amount of contribution (\$)
300.00

6 Contributor address; City; State; Zip Code
**22814 Citron Circle
San Antonio, TX 78260**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
None

Date
5/5/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Forrest Byas

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**1226 Phantom Valley St
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Sites Mgr

Employer (See instructions)
Zeit Energy

Date
5/5/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Melinda Roberts

Amount of contribution (\$)
300.00

Contributor address; City; State; Zip Code
**3407 Hunters Walk
San Antonio, TX 78230**

Principal occupation / Job title (See instructions)
Realtor

Employer (See instructions)
Keller Williams City View

Date
5/5/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paula Hilliard

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**1111 private rd.
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
Na

Employer (See instructions)
Na

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/5/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Todd Helmer

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**2714 Old Ranch Rd.
San Antonio, TX 78217**

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

9 Employer (See instructions)
Purple Martin Real Estate

Date
5/5/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tina Penno

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**18 Park Deville
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Administration

Employer (See instructions)
Methodist Stone Oak

Date
5/6/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Chris Hummel

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**7519 Bridgewater Dr.
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
5/6/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Susan Parker

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**17 Greens Cliff
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Homemaker

Employer (See instructions)
N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 5 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/6/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bridie Chaudoir 6 Contributor address; City; State; Zip Code 8822 Pineridge Road San Antonio, TX 78217	7 Amount of contribution (\$) 150.00
8 Principal occupation / Job title (See instructions) Career Counselor		9 Employer (See instructions) GHTX
Date 5/6/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Robert Sinclair Contributor address; City; State; Zip Code 33 Inwood Mnr San Antonio, TX 78248	Amount of contribution (\$) 25.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 5/6/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) William Locke Contributor address; City; State; Zip Code 601 Contour Dr San Antonio, TX 78212	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) NA
Date 5/6/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Earl Ferguson Contributor address; City; State; Zip Code 6 Lost Timbers San Antonio, TX 78248	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Physician		Employer (See instructions) Earl E Ferguson MD PA
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
6 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/6/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Don Kirchoff

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**22814 Citron Circle
San Antonio, TX 78260**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Self

Date
5/6/2025

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**300 West French Place
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
Self

Employer (See instructions)
Self

Date
5/6/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paul James

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**18385 Babcock Rd
San Antonio, TX 78255**

Principal occupation / Job title (See instructions)
Engineer

Employer (See instructions)
J4 Oilfield Services

Date
5/7/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jack Finger

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**PO Box 12048
San Antonio, TX 78272**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 7 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/7/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Grant Moody for Bexar County 6 Contributor address; City; State; Zip Code 8710 Silver Rock San Antonio, TX 78255	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Commissioner		9 Employer (See instructions) Bexar County
Date 5/7/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) John L Brenneman Contributor address; City; State; Zip Code 4 Bromwich Ct. San Antonio, TX 78218	Amount of contribution (\$) 75.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) retired
Date 5/7/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edward & Nancy Cross II Contributor address; City; State; Zip Code 700 E. Hildebrand Avenue San Antonio, TX 78212	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) CEO		Employer (See instructions) San Antonio Commercial Advisors
Date 5/7/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heart de San Antonio Republican PAC Contributor address; City; State; Zip Code PO Box 120271 San Antonio, TX 78212	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) PAC		Employer (See instructions) PAC
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/7/2025

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

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**123 Lexington Ave
San Antonio, TX 78205**

8 Principal occupation / Job title (See instructions)
Manager

9 Employer (See instructions)
Reyes Automotive

Date
5/7/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ray Cacace

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**3511 TRAILWAY PARK ST
SAN ANTONIO, TX 78247**

Principal occupation / Job title (See instructions)
HR

Employer (See instructions)
Endeavors

Date
5/7/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Denise Wayman

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**2254 Encino Loop
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
Retired teacher

Employer (See instructions)
NEISD

Date
5/7/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
JACK GUENTHER JR

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**153 TREELINE PARK
SAN ANTONIO, TX 78209**

Principal occupation / Job title (See instructions)
INVESTOR

Employer (See instructions)
SELF EMPLOYED

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
9 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/7/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Julia Norton-Keidel

7 Amount of contribution (\$)
199.00

6 Contributor address; City; State; Zip Code
**218 Stanford Dr
San Antonio, TX 78212**

8 Principal occupation / Job title (See instructions)
retired

9 Employer (See instructions)
retired

Date
5/7/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dr Dennis Stuckey

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**1047 Grassmarket
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
AF Dentist

Employer (See instructions)
Retired

Date
5/7/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nelson Greeman

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**15815 Bell Flower Dr
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
optometrist

Employer (See instructions)
Greeman & Greeman

Date
5/7/2025

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1710 Notting HI
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
DoD

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
10 of 36

2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/8/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Linebarger Goggan Blair & Sampson, LLP Attorneys at Law

7 Amount of contribution (\$)
500.00

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

8 Principal occupation / Job title (See instructions)
Law Firm

9 Employer (See instructions)
Law Firm

Date
5/8/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
ELISABETH KOLENBERG

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**2602 PLUM HOLLOW
SAN ANTONIO, TX 78258**

Principal occupation / Job title (See instructions)
BOOKKEEPER

Employer (See instructions)
SELF-EMPLOYED

Date
5/9/2025

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**11530 High Meadow
San Antonio, TX 78253**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
5/9/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nettie Lamerson

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**118 Lantana Way
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
11 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/9/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Bexar County Republican Women PAC

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**13423 Blanco Rd.
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
PAC

9 Employer (See instructions)
PAC

Date
5/9/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Nora Espinoza

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**739 Lost Canyon
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
5/9/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Republican Women PAC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 700523
San Antonio, TX 78270**

Principal occupation / Job title (See instructions)
PAC

Employer (See instructions)
PAC

Date
5/9/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lawrence Whyte

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**2215 Alcova Ridge Drive
Las Vegas, NV 89135**

Principal occupation / Job title (See instructions)
Company president

Employer (See instructions)
Nitrade Inc

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/10/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Chris Aldrete

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**335 Country Wood Drive
San Antonio, TX 78216**

8 Principal occupation / Job title (See instructions)
Consultant

9 Employer (See instructions)
Aldrete Strategic Partners, LLC

Date
5/11/2025

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**810 E OLMOS DR
SAN ANTONIO, TX 78212**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
McCombs Enterprises

Date
5/11/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Christopher Longoria

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**3400 Salado Creek Dr.
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)
Representative

Employer (See instructions)
Primerica

Date
5/11/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Sheree Nelson

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**25007 Arrow Glen
San Antonio , TX 78258**

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

Employer (See instructions)
JB Goodwin

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 13 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Andrew L Holland 6 Contributor address; City; State; Zip Code 344 Harmon San Antonio, TX 78209	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Vice President		9 Employer (See instructions) Copperhead Construction Svcs.
Date 5/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tilman J & Paige Fertitta Contributor address; City; State; Zip Code 1510 West Loop South Houston, TX 77027	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Owner		Employer (See instructions) Landrys
Date 5/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dylan McDonald & Caroline Brown Contributor address; City; State; Zip Code 210 Cave Ln San Antonio, TX 78209	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Attorney
Date 5/12/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richard & Lisa Sheldon Contributor address; City; State; Zip Code 4006 Green Oak Dr. Waco, TX 76710	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) self		Employer (See instructions) Rick Sheldon Real Estate
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/12/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Sarah & Jerad Baynham

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
**28502 Benedikt Path
Boerne, TX 78006**

8 Principal occupation / Job title (See instructions)
Realtor

9 Employer (See instructions)
Self

Date
5/12/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tony Cerna & Frances Martinez III

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**292 Abrego Lake Drive
Floresville, TX 78114**

Principal occupation / Job title (See instructions)
VP Sales & Marketing

Employer (See instructions)
Lennar

Date
5/12/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
diane rath

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**68 Bristol Grn
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
NA

Date
5/12/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kris Coons

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**15667 Robin Ridge Road
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/13/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Clay Jackson

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**2047 Rigsby Ave.
San Antonio, TX 78210**

8 Principal occupation / Job title (See instructions)
self

9 Employer (See instructions)
self

Date
5/13/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Fire & Police Pens Assn- PAC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**11603 W. Coker Loop
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
PAC

Employer (See instructions)
PAC

Date
5/13/2025

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

Amount of contribution (\$)
400.00

Contributor address; City; State; Zip Code
**2515 W Commerce
San Antonio, TX 78207**

Principal occupation / Job title (See instructions)
Bondsman

Employer (See instructions)
Eagle Bail Bonds

Date
5/13/2025

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6827 Rock Rd
San Antonio, TX 78229**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Rodriguez Industries

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/13/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Edward Pina

7 Amount of contribution (\$)
200.00

6 Contributor address; City; State; Zip Code
**2419 Trace Oak
San Antonio, TX 78232**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
None

Date
5/14/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lille Gough

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**3606 Shimmering Dawn St.
San Antonio, TX 78253**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
5/14/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ethan & Christi Guinn

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**30415 Cibolo Run
Boerne, TX 78015**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
CB Directional Signs

Date
5/14/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Randy Cain

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**820 Cambridge Oval
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/14/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
daniel fishman

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**1124 N Mar Vista Ave
Pasadena, CA 91104**

8 Principal occupation / Job title (See instructions)
Education

9 Employer (See instructions)
Choose to Succeed

Date
5/15/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Columba Wilson

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**2931 Quail Oak st.
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
5/15/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Deputy Sheriffs Association of Bexar County

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9200 Broadway #106
San Antonio, TX 78217**

Principal occupation / Job title (See instructions)
PAC

Employer (See instructions)
PAC

Date
5/15/2025

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9311 San Pedro Ave. #600
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Chairman

Employer (See instructions)
SWBC

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 18 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Terry Lippman 6 Contributor address; City; State; Zip Code 3914 Monteverde Way San Antonio, TX 78261	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See instructions) NA		9 Employer (See instructions) NA
Date 5/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Katherine & Clifton Karam Contributor address; City; State; Zip Code 7715 Battle Intense Boerne, TX 78015	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) VP Land Acquisitions		Employer (See instructions) Lennar
Date 5/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Felix & Brenda Flores Contributor address; City; State; Zip Code 3906 Miho San Antonio, TX 78223	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) VP Purchasing		Employer (See instructions) Lennar
Date 5/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carol Van De Walle Contributor address; City; State; Zip Code 1301 Vista Del Monte San Antonio, TX 78216	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) n/a
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 19 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Charlotte Burdine 6 Contributor address; City; State; Zip Code 27211 Timberline Dr. San Antonio, TX 78260	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Retired		9 Employer (See instructions) Retired
Date 5/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Aileen Boone Contributor address; City; State; Zip Code 12807 Terrace Pass San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) nurse		Employer (See instructions) self
Date 5/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Humberto Quintanilla Contributor address; City; State; Zip Code 22303 Covella Ct. San Antonio, TX 78259	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
Date 5/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Thomas C Mayes Contributor address; City; State; Zip Code 11111 private rd. San Antonio, TX 78232	Amount of contribution (\$) 200.00
Principal occupation / Job title (See instructions) Attorney		Employer (See instructions) Jim Adler & Associates
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/16/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Police Officers Association

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**1939 NE Loop 410 #300
San Antonio, TX 78217**

8 Principal occupation / Job title (See instructions)
PAC

9 Employer (See instructions)
PAC

Date
5/16/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard & Amber Mott

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**1187 Via Principale
New Braunfels, TX 78132**

Principal occupation / Job title (See instructions)
none

Employer (See instructions)
None

Date
5/16/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jan & Jay Wilke

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**6370 Alternate 90
Seguin, TX 78155**

Principal occupation / Job title (See instructions)
Landlord

Employer (See instructions)
Self

Date
5/16/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Louis Barrios

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**1102 Morgans Peak
San Antonio , TX 78258**

Principal occupation / Job title (See instructions)
President

Employer (See instructions)
Los Barrios

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/17/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard Wilson

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**23910 W. I-H 10
San Antonio, TX 78257**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Self

Date
5/17/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
DAVID GARDNER

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**415 STONEWOOD
SAN ANTONIO, TX 78216**

Principal occupation / Job title (See instructions)
RETIRED

Employer (See instructions)
RETIRED

Date
5/17/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Catherine Stamper

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**15627 dove mdw
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Lawyer

Employer (See instructions)
Wells Fargo

Date
5/18/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jane Everhart

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2619 Brookhurst
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/18/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Reena Thomas

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**13651 Treasure Trail Dr.
San Antonio, TX 78232**

8 Principal occupation / Job title (See instructions)
MD

9 Employer (See instructions)
Self

Date
5/18/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stephen Raub

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**15703 Mission Crst
San Antonio, TX 78232**

Principal occupation / Job title (See instructions)
Real Estate

Employer (See instructions)
IRC Realty Co

Date
5/19/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Greg & Bekki Kowalski

Amount of contribution (\$)
1000.00

Contributor address; City; State; Zip Code
**PO Box 1361
San Antonio, TX 78295**

Principal occupation / Job title (See instructions)
Hospitality

Employer (See instructions)
Self

Date
5/19/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Charter Schools Now PAC

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**3005 S. Lamar Blvd.
Austin, TX 78704**

Principal occupation / Job title (See instructions)
PAC

Employer (See instructions)
PAC

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 23 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ross Properties, LLC 6 Contributor address; City; State; Zip Code PO Box 28490 San Antonio, TX 78228	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See instructions) Real Estate Firm		9 Employer (See instructions) Real Estate Firm
Date 5/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Dr Dennis Stuckey Contributor address; City; State; Zip Code 107 Grassmarket San Antonio, TX 78259	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) Retired military		Employer (See instructions) n/a
Date 5/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Loretta Von Behren Contributor address; City; State; Zip Code 9 Champions Run San Antonio , TX 78258	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) NA
Date 5/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jacob Keating Contributor address; City; State; Zip Code 20815 Stella Doro San Antonio , TX 78259	Amount of contribution (\$) 250.00
Principal occupation / Job title (See instructions) Soldier		Employer (See instructions) U.S. Army

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 24 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bob Parks 6 Contributor address; City; State; Zip Code 3219 Tavern Oaks St. San Antonio, TX 78247	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Business Owner		9 Employer (See instructions) Texas Mgt Associates, Inc
Date 5/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Inderjit Mehat Contributor address; City; State; Zip Code 11219 Jadestone Blvd. San Antonio, TX 78249	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Self		Employer (See instructions) Self
Date 5/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alan Crowther Contributor address; City; State; Zip Code 20079 Stone Oak Parkway #1105 San Antonio, TX 78258	Amount of contribution (\$) 300.00
Principal occupation / Job title (See instructions) Doctor		Employer (See instructions) Self
Date 5/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mary Ellen Snell Contributor address; City; State; Zip Code 27682 Oak Brook Way Boerne, TX 78015	Amount of contribution (\$) 100.00
Principal occupation / Job title (See instructions) Retired		Employer (See instructions) Retired
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/20/2025

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

7 Amount of contribution (\$)
100.00

6 Contributor address; City; State; Zip Code
**24385 Wilderness Oak
San Antonio, TX 78258**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Self

Date
5/20/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Paul Comeaux

Amount of contribution (\$)
200.00

Contributor address; City; State; Zip Code
**5545 Mt. McKinley Dr.
San Antonio, TX 78251**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

Date
5/20/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stephani Walsh

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**2819 Barrel Oak Street
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)
Mediator

Employer (See instructions)
Self employed

Date
5/21/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Irfan Butt

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**9006 Eagle Bend
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
Self

Employer (See instructions)
Self

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/21/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Mohammad S Rana

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**13426 Baldwin Ridge
San Antonio, TX 78249**

8 Principal occupation / Job title (See instructions)
Self

9 Employer (See instructions)
Self

Date
5/21/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Daiana Lambrecht

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**415 Mary Louise Dr.
San Antonio, TX 78201**

Principal occupation / Job title (See instructions)
Executive Director

Employer (See instructions)
Futuro San Antonio

Date
5/21/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
James & Kimberly McKnight

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2019 Flint Oak
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Attorney

Date
5/21/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Ortiz McKnight PLLC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**112 E. Pecan Street #1350
San Antonio, TX 78205**

Principal occupation / Job title (See instructions)
Law Firm

Employer (See instructions)
Law Firm

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
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5 Full name of contributor ☐ out-of-state PAC (ID# _____)
James Stewart

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**3713 Tulip Dam
San Antonio, TX 78253**

8 Principal occupation / Job title (See instructions)
author

9 Employer (See instructions)
self

Date
5/21/2025

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

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Ortiz McKnight PLLC

Date
5/21/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scott Stewart

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**2900 Sweet Home rd
Seguin, TX 78156**

Principal occupation / Job title (See instructions)
Business Owner

Employer (See instructions)
Stewart Services

Date
5/21/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
HENRY GONZALEZ

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**419 Thelma Drive
San Antonio, TX 78212**

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

Employer (See instructions)
Gonzalez Chiscano Angulo Kasson:Jefferson Bank

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
28 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/21/2025

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

7 Amount of contribution (\$)
100.00

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

8 Principal occupation / Job title (See instructions)
Self

9 Employer (See instructions)
Eb

Date
5/21/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Victoria Rico

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
212 E Wildwood
San Antonio, TX 78212

Principal occupation / Job title (See instructions)
trustee

Employer (See instructions)
self

Date
5/22/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
HNB Investment, LLC

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Self

Employer (See instructions)
Self

Date
5/22/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Randy Clark

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
18919 redriver trail
San Antonio, TX 78259

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
na

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
29 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/22/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Richard Wilson

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
**23910 W. Interstate 10
San Antonio, TX 78257**

8 Principal occupation / Job title (See instructions)
retired

9 Employer (See instructions)
self

Date
5/22/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Susan Parker

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
**17 Greens Cliff
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Homemaker

Employer (See instructions)
N/a

Date
5/22/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Herbert Keilers

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**18102 Summer Knoll Dr
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Retired Fire Fighter

Employer (See instructions)
SAFD - Retired

Date
5/23/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
SABPAC I

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**3625 Paesanos Parkway
San Antonio, TX 78231**

Principal occupation / Job title (See instructions)
PAC

Employer (See instructions)
PAC

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 30 of 36
2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patricia Vasquez 6 Contributor address; City; State; Zip Code 1702 Portage Path San Antonio, TX 78232	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See instructions) Self employed		9 Employer (See instructions) Self employed
Date 5/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lydia Borrero Contributor address; City; State; Zip Code 2922 Panzano Place San Antonio, TX 78258	Amount of contribution (\$) 50.00
Principal occupation / Job title (See instructions) retired		Employer (See instructions) none
Date 5/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Darren KUYRKENDALL Contributor address; City; State; Zip Code 538 Bluffestates San Antonio, TX 78216	Amount of contribution (\$) 1000.00
Principal occupation / Job title (See instructions) Real Estate		Employer (See instructions) Kuyrkendall And Company
Date 5/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reuben Bar Yadin Contributor address; City; State; Zip Code 218 Wellesley Landing San Antonio , TX 78231	Amount of contribution (\$) 500.00
Principal occupation / Job title (See instructions) Self employed		Employer (See instructions) CBG
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/25/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
James Stewart

7 Amount of contribution (\$)
25.00

6 Contributor address; City; State; Zip Code
**3713 Tulip Dam
San Antonio, TX 78253**

8 Principal occupation / Job title (See instructions)
author

9 Employer (See instructions)
self

Date
5/26/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Kristi Sutterfield

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**18523 Wild Onion
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Executive Officer

Employer (See instructions)
Greater San Antonio Builders Association

Date
5/26/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
David & Debby Cohen

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**15638 Dawn Crst
San Antonio, TX 78248**

Principal occupation / Job title (See instructions)
Physician

Employer (See instructions)
Hill Country Wound Care

Date
5/26/2025

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**605 Contadora
San Antonio, TX 78258**

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
Law Office of Ryan C. Moe, PLLC

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
32 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/26/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Benjamin Montanez

7 Amount of contribution (\$)
250.00

6 Contributor address; City; State; Zip Code
18303 Settlement Way
San Antonio, TX 78258

8 Principal occupation / Job title (See instructions)
Lawyer

9 Employer (See instructions)
Norton Rose Fulbright

Date
5/26/2025

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

Amount of contribution (\$)
500.00

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

Principal occupation / Job title (See instructions)
Attorney

Employer (See instructions)
RPSA

Date
5/26/2025

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
17719 Wild Basin
San Antonio, TX 78258

Principal occupation / Job title (See instructions)
Chauffeured Transportation

Employer (See instructions)
CTA Worldwide Chauffeured Transportation

Date
5/26/2025

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

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
5126 N Loop 1604 E
San Antonio, TX 78247

Principal occupation / Job title (See instructions)
Non-Profit

Employer (See instructions)
Americans for Prosperity

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/27/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Patti & Brian Barron

7 Amount of contribution (\$)
1000.00

6 Contributor address; City; State; Zip Code
**9003 Jodhpur Dr
Boerne, TX 78015**

8 Principal occupation / Job title (See instructions)
None

9 Employer (See instructions)
None

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Derek Naiser

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**104 Summer Glen
Boerne, TX 78006**

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

Employer (See instructions)
Ardurra

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Inga Cotton

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**537 Abiso Ave
San Antonio, TX 78209**

Principal occupation / Job title (See instructions)
Nonprofit Executive

Employer (See instructions)
San Antonio Charter Moms

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Christine Nichol

Amount of contribution (\$)
50.00

Contributor address; City; State; Zip Code
**414 Lazy Bluff
San Antonio, TX 78216**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
Retired

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
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2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/27/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Valero Political Action Committee

7 Amount of contribution (\$)
500.00

6 Contributor address; City; State; Zip Code
**PO Box 696000
San Antonio, TX 78269**

8 Principal occupation / Job title (See instructions)
PAC

9 Employer (See instructions)
PAC

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
TREPAC- Texas Realtors PAC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**PO Box 2246
Austin, TX 78768**

Principal occupation / Job title (See instructions)
PAC

Employer (See instructions)
PAC

Date
5/27/2025

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

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**305 W. Kings Hwy
San Antonio, TX 78212**

Principal occupation / Job title (See instructions)
CEO

Employer (See instructions)
Monterrey Metal

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Randy Clark

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**18919 redriver trail
San Antonio, TX 78259**

Principal occupation / Job title (See instructions)
retired

Employer (See instructions)
na

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
35 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/27/2025

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Denise Wayman

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
2254 Encino Loop
San Abtonio, TX 78259

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

9 Employer (See instructions)
NEISD

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Dennis stuckey

Amount of contribution (\$)
25.00

Contributor address; City; State; Zip Code
107 Grassmarket
San Antonio, TX 78259

Principal occupation / Job title (See instructions)
USAF military

Employer (See instructions)
retired

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
mike weiss

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
6812 west avenue
San Antonio, TX 78213

Principal occupation / Job title (See instructions)
real estate

Employer (See instructions)
4M Properties

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Perry Donop

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
7744 Broadway #108
San Antonio , TX 78209

Principal occupation / Job title (See instructions)
Commercial real estate decry

Employer (See instructions)
Self

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
36 of 36

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date
5/27/2025

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

7 Amount of contribution (\$)
50.00

6 Contributor address; City; State; Zip Code
**901 NE loop 410 #415
san antonio, TX 78209**

8 Principal occupation / Job title (See instructions)
Retired

9 Employer (See instructions)
Excel Benefits Inc

Date
5/27/2025

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

Amount of contribution (\$)
250.00

Contributor address; City; State; Zip Code
**5227 Stormy Trail
San Antonio, TX 78247**

Principal occupation / Job title (See instructions)
Administration

Employer (See instructions)
VIA

Date
5/27/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jacquelyn Fisher

Amount of contribution (\$)
100.00

Contributor address; City; State; Zip Code
**25810 Peregrine Rdg
San Antonio, TX 78260**

Principal occupation / Job title (See instructions)
Retired

Employer (See instructions)
N/A

Date
5/28/2025

Full name of contributor ☐ out-of-state PAC (ID# _____)
San Antonio Apartment Association - PAC

Amount of contribution (\$)
500.00

Contributor address; City; State; Zip Code
**7525 Babcock Rd
San Antonio, TX 78249**

Principal occupation / Job title (See instructions)
PAC

Employer (See instructions)
PAC

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

PLEDGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B:
1 of 1

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID# _____)

8 Amount of Pledge \$

9 In-kind contribution description

7 Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

10 Principal occupation / Job title (See instructions)

11 Employer (See instructions)

Date

Full name of pledgor ☐ out-of-state PAC (ID# _____)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of pledgor ☐ out-of-state PAC (ID# _____)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (See instructions)

Employer (See instructions)

Date

Full name of pledgor ☐ out-of-state PAC (ID# _____)

Amount of Pledge \$

In-kind contribution description

Pledgor address; City; State; Zip Code

☐ Check if travel outside of Texas, complete Schedule T

Principal occupation / Job title (See instructions)

Employer (See instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS

\$ 0

5 Date of loan

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

9 Loan Amount (\$)

6 Is lender a
financial
institution?

8 Lender address; City; State; Zip Code

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See instructions)

13 Employer (See instructions)

14 Description of Collateral
☐ none

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

16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

18 Guarantor address; City; State; Zip Code

☐ not applicable

20 Principal occupation (See instructions)

21 Employer (See instructions)

Date of loan

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

Loan Amount (\$)

Is lender a
financial
institution?

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See instructions)

Employer (See instructions)

Description of Collateral
☐ none

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

GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

Guarantor address; City; State; Zip Code

☐ not applicable

Principal occupation (See instructions)

Employer (See instructions)

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 1 of 7	2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/3/2025	5 Payee name Walgreens		
6 Amount (\$) 14.25	7 Payee address; City; State; Zip Code 22114 Bulverde Rd. San Antonio, TX 78261		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description water and ice
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 5/3/2025	Payee name Los Arcos Mexican Grill		
Amount (\$) 50.03	Payee address; City; State; Zip Code 22106 Bulverde Rd. San Antonio, TX 78259		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description food for volunteers
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			
Date 5/3/2025	Payee name Bigz Burger Joint		
Amount (\$) 1036.99	Payee address; City; State; Zip Code 2303 N. Loop 1604 W. San Antonio, TX 78258		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description watch party
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 2 of 7	2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/5/2025	5 Payee name Norma Denham & Associates		
6 Amount (\$) 2000.00	7 Payee address; City; State; Zip Code 15706 Knoll Cliff San Antonio, TX 78247		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense		(b) Description consulting - fundraising
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/5/2025	Payee name Election Support Services		
Amount (\$) 2100.00	Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Block walking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/6/2025	Payee name Shipleigh Donuts		
Amount (\$) 16.38	Payee address; City; State; Zip Code 2407 E Evans Rd San Antonio, TX 78259		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description breakfast meeting
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 3 of 7	2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/8/2025	5 Payee name Black Rifle Company		
6 Amount (\$) 7.03	7 Payee address; City; State; Zip Code 180 W Bitters Rd San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Food/Beverage Expense		(b) Description coffee meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/8/2025	Payee name Seasons 52		
Amount (\$) 50.85	Payee address; City; State; Zip Code 255 E. Basse #1400 San Antonio, TX 78209		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description Lunch meeting
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/9/2025	Payee name Election Support Services		
Amount (\$) 200.00	Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description palm cards
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 4 of 7	2 FILER NAME Mrs Misty D Spears	3 Filer ID (Ethics Commission Filers)
4 Date 5/9/2025	5 Payee name Election Support Services	
6 Amount (\$) 2036.00	7 Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Block Walking
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 5/12/2025	Payee name Bexar County Republican Women		
Amount (\$) 35.00	Payee address; City; State; Zip Code 13423 Blanco Rd. #317 San Antonio, TX 78216		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description Luncheon	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

Date 5/13/2025	Payee name Clear Channel Outdoor		
Amount (\$) 5900.00	Payee address; City; State; Zip Code 3714 N. Pan Am Expressway San Antonio, TX 78219		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description billboards- outdoor	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 5 of 7	2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/16/2025	5 Payee name Max & Louies Diner		
6 Amount (\$) 410.63	7 Payee address; City; State; Zip Code 226 W Bitters Rd #126 San Antonio, TX 78216		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description Food and beverages for event.
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/22/2025	Payee name Election Support Services		
Amount (\$) 3912.50	Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Block walking
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/23/2025	Payee name Election Support Services		
Amount (\$) 950.00	Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description Pushcards
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 6 of 7	2 FILER NAME Mrs Misty D Spears		3 Filer ID (Ethics Commission Filers)
4 Date 5/28/2025	5 Payee name Stripe		
6 Amount (\$) 674.44	7 Payee address; City; State; Zip Code 354 Oyster Point Blvd South San Francisco, CA 94080		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Accounting/Banking		(b) Description credit card fees
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/28/2025	Payee name Election Support Services		
Amount (\$) 240.00	Payee address; City; State; Zip Code 2611 Rompel Pass San Antonio, TX 78232		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description pushcards
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 5/28/2025	Payee name JVC Media, LLC		
Amount (\$) 233.82	Payee address; City; State; Zip Code 3106 Fall Crest Dr. San Antonio, TX 78278		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense		Description t-shirts
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F1: 7 of 7	2 FILER NAME Mrs Misty D Spears	3 Filer ID (Ethics Commission Filers)
4 Date 5/28/2025	5 Payee name JVC Media, LLC	
6 Amount (\$) 1420.78	7 Payee address; City; State; Zip Code 3106 Fall Crest Dr. San Antonio, TX 78278	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description yard signs
	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		

Date 5/28/2025	Payee name Bigz Burger Joint		
Amount (\$) 250.00	Payee address; City; State; Zip Code 2303 N. Loop 1604 W. San Antonio, TX 78258		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Event Expense	Description Event deposit	
	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held			

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F2: 1 of 1	2 FILER NAME Mrs Misty D Spears	3 Filer ID (Ethics Commission Filers)				
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0				
5 Date	6 Payee name					
7 Amount (\$)	8 Payee address; City; State; Zip Code					
9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political					
10 PURPOSE OF EXPENDITURE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> (a) Category (See categories listed at the top of this schedule) </td> <td style="width: 50%; vertical-align: top;"> (b) Description </td> </tr> <tr> <td colspan="2" style="vertical-align: top;"> (c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense </td> </tr> </table>		(a) Category (See categories listed at the top of this schedule)	(b) Description	(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
(a) Category (See categories listed at the top of this schedule)	(b) Description					
(c) <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense						
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought</td> <td style="width: 33%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held	
Candidate / Officeholder name	Office sought	Office held				

Date	Payee name					
Amount (\$)	Payee address; City; State; Zip Code					
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political					
PURPOSE OF EXPENDITURE	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;">Category (See categories listed at the top of this schedule)</td> <td style="width: 50%; vertical-align: top;">Description</td> </tr> <tr> <td colspan="2" style="vertical-align: top;"> <input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense </td> </tr> </table>		Category (See categories listed at the top of this schedule)	Description	<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Category (See categories listed at the top of this schedule)	Description					
<input type="checkbox"/> Check if travel outside of Texas, complete schedule T <input type="checkbox"/> Check if Austin, TX, officeholder living expense						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH						
<table style="width: 100%;"> <tr> <td style="width: 33%;">Candidate / Officeholder name</td> <td style="width: 33%;">Office sought</td> <td style="width: 33%;">Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held	
Candidate / Officeholder name	Office sought	Office held				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F3:
1 of 1

2 FILER NAME

Mrs Misty D Spears

3 Filer ID (Ethics Commission Filers)

4 Date

5 Name of person from whom investment is purchased

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

7 Description of investment

8 Amount of investment (\$)

Date

Name of person from whom investment is purchased

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

Description of investment

Amount of investment (\$)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule F4: 1 of 1	2 FILER NAME Mrs Misty D Spears	3 Filer ID (Ethics Commission Filers)
--	--	--

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0
--	-------------

5 Date	6 Payee name
---------------	---------------------

7 Amount (\$)	8 Payee address; City; State; Zip Code
----------------------	---

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

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

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

Date	Payee name
------	------------

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

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

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form

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

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

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form

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

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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: 1 of 1	2 FILER NAME Mrs Misty D Spears		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.)	
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	Description (See instructions regarding type of information required.)	

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

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Mrs Misty D Spears

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

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

Date

Name of person from whom amount is received

Amount (\$)

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

Purpose for which amount is received

☐ Check if political contribution returned to filer

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

SCHEDULE T

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

CANDIDATE / OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

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

C/OH NAME
Mrs Misty D Spears

Filer ID (Ethics Commission Filers)

SIGNATURE

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

Signature of Candidate / Officeholder

FILER WHO IS NOT AN OFFICEHOLDER

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

A. CAMPAIGN FUNDS

Check only one:

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

B. ASSETS

Check only one:

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

Signature of Candidate

OFFICEHOLDER

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

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

Signature of Officeholder