

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:			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY: FILED IN THE OFFICE OF MICHELE CAREY ELECTIONS ADMINISTRATOR BEXAR COUNTY 2026 FEB 23 PM 1:31		
	NICKNAME	LAST	SUFFIX			
Ms.		Luz Elena				
		Chapa				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	PO Box 12156 San Antonio, TX 78212					
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(210)	982-3034				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI			
	NICKNAME	LAST	SUFFIX			
Mrs.		Leticia				
		Van de Putte				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE	
	212 W. Laurel San Antonio, TX 78212					
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION			
	(210)	982-3034				
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)					
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)					
10 PERIOD COVERED	Month	Day	Year	Month	Day	Year
	01	23	2026	THROUGH	02	21
11 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description
03 / 03 / 2026			<input type="checkbox"/> General	<input type="checkbox"/> Special		
12 OFFICE	OFFICE HELD (if any)			13 OFFICE SOUGHT (if known)		
				Bexar County Criminal District Attorney		
14 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS				
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRESS				

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Luz Elena Chapa		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 25,700.90
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 245,071.52
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 50,372.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 100,000.00

18 SIGNATURE 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.

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by _____ this the _____ day of _____, 20_____, 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

OR

(2) Unsworn Declaration

My name is Luz Elena Chapa, and my date of birth is 06/24/1973.

My address is PO Box 12156, San Antonio, TX, 78212, USA.

(street) (city) (state) (zip code) (country)

Executed in Bexar County, State of Texas, on the 23 day of February, 2026.

Luz Elena Chapa
Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME Luz Elena Chapa		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,791.07
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,909.83
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$245,071.52
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Luz Elena Chapa		3 Filer ID (Ethics Commission Filers)
4 Date 1/26/26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Doris Slay-Barber	7 Amount of contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code PO Box 176 Adkins TX 78201		
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Lone Oak Village
Date 1/27/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kathryn Glast	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 37 Sanctuary Drive San Antonio TX 78248		
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 1/29/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Virginia Eisenberg	Amount of contribution (\$) \$250.00
Contributor address; City; State; Zip Code 16 Garden Sq San Antonio TX 78209		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) The Eisenberg Group
Date 1/30/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephanie Zertuche	Amount of contribution (\$) \$260.73
Contributor address; City; State; Zip Code 9426 Valley Way Dr San Antonio TX 78250		
Principal occupation / Job title (See Instructions) Litigation Paralegal		Employer (See Instructions) Volk & McElroy
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Luz Elena Chapa		3 Filer ID (Ethics Commission Filers)
4 Date 2/2/26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Javier Espinoza	7 Amount of contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code 10202 Heritage Blvd. San Antonio TX 78216	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Espinoza & Brock, PLLC
Date 2/3/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mario Del Prado	Amount of contribution (\$) \$1,041.98
	Contributor address; City; State; Zip Code 8251 Pimlico Ln Fair Oaks Ranch TX 78015	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Del Prado Law
Date 2/4/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott Bage	Amount of contribution (\$) \$521.15
	Contributor address; City; State; Zip Code 5152 Broadway Ste 202 San Antonio TX 78209	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Scott M. Bage, PC
Date 2/4/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Police Officers Association PAC	Amount of contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code 1939 NE Loop 410 Ste 300 San Antonio, TX 78217	
Principal occupation / Job title (See Instructions) n/a		Employer (See Instructions) n/a
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Luz Elena Chapa		3 Filer ID (Ethics Commission Filers)
4 Date 2/4/26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guy R Buschman	7 Amount of contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code PO Box 17289 San Antonio, TX 78217	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) August Management
Date 2/5/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oscar Garza	Amount of contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 6243 IH 10 West. Ste 970 San Antonio TX 78201	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Firm of Oscar Garza
Date 2/5/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Menick	Amount of contribution (\$) \$52.40
	Contributor address; City; State; Zip Code 306 Belvidere Dr San Antonio, TX TX 78212	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 2/5/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Kellum	Amount of contribution (\$) \$2,604.48
	Contributor address; City; State; Zip Code 330 E. Summit Ave San Antonio, TX 78212	
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Kellum Physician Partners
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8

2 FILER NAME
Luz Elena Chapa

3 Filer ID (Ethics Commission Filers)

4 Date
2/5/26

5 Full name of contributor out-of-state PAC (ID#: _____)
Daniel Barrett

7 Amount of contribution (\$)
\$250.00

6 Contributor address; City; State; Zip Code
1017 N Main Ave Ste 204 San Antonio TX 78212

8 Principal occupation / Job title (See Instructions)
CEO

9 Employer (See Instructions)
Barrett Insurance Services

Date
2/6/26

Full name of contributor out-of-state PAC (ID#: _____)
Pat Maloney, Jr.

Amount of contribution (\$)
\$1,041.98

Contributor address; City; State; Zip Code
239 West Commerce Street San Antonio TX 78205

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Law Offices of Pat Maloney, Jr.

Date
2/6/26

Full name of contributor out-of-state PAC (ID#: _____)
Imelda Sanchez

Amount of contribution (\$)
\$1,000.00

Contributor address; City; State; Zip Code
223 Early Trail San Antonio TX 78228

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Henry's Puffy Tacos

Date
2/6/26

Full name of contributor out-of-state PAC (ID#: _____)
Rolando Gutierrez

Amount of contribution (\$)
\$1,562.81

Contributor address; City; State; Zip Code
1426 Napier San Antonio TX 78214

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self

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

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Luz Elena Chapa		3 Filer ID (Ethics Commission Filers)
4 Date 2/6/26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rudy Garza	7 Amount of contribution (\$) \$521.15
6 Contributor address; City; State; Zip Code 757 Treaty Oak San Antonio TX 78258		
8 Principal occupation / Job title (See Instructions) Management		9 Employer (See Instructions) CPS Energy
Date 2/6/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest W Bromley	Amount of contribution (\$) \$521.15
Contributor address; City; State; Zip Code 19 Westelm Circle San Antonio TX 78230		
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Pescador Public Strategies
Date 2/6/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deputy Sheriffs Association of Bexar County PAC	Amount of contribution (\$) \$2500.00
Contributor address; City; State; Zip Code 9200 Broadway Ste 206 San Antonio TX 78217		
Principal occupation / Job title (See Instructions) n/a		Employer (See Instructions) n/a
Date 2/7/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bill Barker	Amount of contribution (\$) \$104.48
Contributor address; City; State; Zip Code 121 Castle Hills Dr. San Antonio TX 78213		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
8

2 FILER NAME

Luz Elena Chapa

3 Filer ID (Ethics Commission Filers)

4 Date

2/7/26

5 Full name of contributor

out-of-state PAC (ID#: _____)

Joyce Townsend

6 Contributor address;

City;

State;

Zip Code

15662 Robin Ridge San Antonio TX 78248

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

Retired

9 Employer (See Instructions)

Retired

Date

2/10/26

Full name of contributor

out-of-state PAC (ID#: _____)

Erika Gonzalez

Contributor address;

City;

State;

Zip Code

238 W Kings Hwy

San Antonio TX 78212

Amount of contribution (\$)

\$500.00

Principal occupation / Job title (See Instructions)

Physician

Employer (See Instructions)

STAAMP

Date

2/11/26

Full name of contributor

out-of-state PAC (ID#: _____)

Margaret Vera

Contributor address;

City;

State;

Zip Code

228 W Agarita Ave

San Antonio TX 78212

Amount of contribution (\$)

\$260.73

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Law Offices of Margaret M. Vera

Date

2/13/26

Full name of contributor

out-of-state PAC (ID#: _____)

Thomas Washmon

Contributor address;

City;

State;

Zip Code

5121 Bee Cave Road Ste 105 Austin TX 78746

Amount of contribution (\$)

\$260.73

Principal occupation / Job title (See Instructions)

President

Employer (See Instructions)

Privateer Capital Management

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

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Luz Elena Chapa		3 Filer ID (Ethics Commission Filers)
4 Date 2/13/26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of David Christian 6 Contributor address; City; State; Zip Code 1800 McCullough San Antonio, TX 78212	7 Amount of contribution (\$) \$2500.00
8 Principal occupation / Job title (See Instructions) n/a		9 Employer (See Instructions) n/a
Date 2/13/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis Cox Contributor address; City; State; Zip Code 8503 Oak Cliff San Antonio TX 78230	Amount of contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) USAA
Date 2/14/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ian Hernandez Contributor address; City; State; Zip Code 3507 Parkside Pearland TX 77584	Amount of contribution (\$) \$521.15
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hernandez Sunosky, LLP
Date 2/14/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daniel Ortiz Contributor address; City; State; Zip Code 9103 Mellbrook St San Antonio TX 78230	Amount of contribution (\$) \$1,041.98
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ortiz McKnight PLLC
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

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 8
2 FILER NAME Luz Elena Chapa		3 Filer ID (Ethics Commission Filers)
4 Date 2/14/26	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernando Reyes	7 Amount of contribution (\$) \$260.73
	6 Contributor address; City; State; Zip Code 123 Lexington Ave Unit 1201 San Antonio TX 78205	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 2/16/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James McKnight	Amount of contribution (\$) \$1,041.98
	Contributor address; City; State; Zip Code 2019 Flint Oak San Antonio TX 78248	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Ortiz McKnight PLLC
Date 2/16/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allison Zeller	Amount of contribution (\$) \$260.73
	Contributor address; City; State; Zip Code 806 College Blvd San Antonio TX 78209	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 2/17/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Mazuca	Amount of contribution (\$) \$260.73
	Contributor address; City; State; Zip Code 430 w Hildebrand San Antonio TX 78212	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) James V. Mazuca
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1	
2 FILER NAME Luz Elena Chapa		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 2/2/26	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra LLP	8 Amount of Contribution \$ \$1,032.00	9 In-kind contribution description Office space
7 Contributor address; City; State; Zip Code 875 E Ashby Pl #1200 San Antonio, TX 78212		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) N/A		11 Employer (FOR NON-JUDICIAL)(See Instructions) N/A	
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 2/6/26	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baltazar Serna	Amount of Contribution \$ \$887.83	In-kind contribution description Food for event
Contributor address; City; State; Zip Code 237 W Travis #100 San Antonio, TX 78205		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) Attorney		Employer (FOR NON-JUDICIAL)(See Instructions) Serna & Serna	
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)			
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>			

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 1/23/26	5 Payee name Starla Martinez	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 5606 Tranquil Dawn San Antonio TX 78218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	(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 ONLY if direct expenditure to benefit C/OH		
Date 1/23/26	Candidate / Officeholder name Giselle Martinez	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 604 El Dorado San Antonio TX 78225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		
Date 1/23/26	Candidate / Officeholder name Amanda Martinez	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 1212 Keats San Antonio TX 78211	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 1/23/26	5 Payee name Courtney Lopez
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6 Amount (\$) \$750.00	7 Payee address; 735 Gladstone	City; San Antonio TX	State; TX	Zip Code 78225
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/23/26	Payee name Eddie Martinez
-----------------	------------------------------

Amount (\$) \$750.00	Payee address; 604 El Dorado	City; San Antonio TX	State; TX	Zip Code 78225
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/23/26	Payee name Patinkin Research Strategies
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Amount (\$) \$31,183.00	Payee address; PO Box 1310	City; Gig Harbor WA	State; WA	Zip Code 98335
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description Polling
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 1/27/26	5 Payee name Anedot	
6 Amount (\$) \$10.30	7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Credit card processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/30/26	Payee name Anedot	
Amount (\$) \$10.73	Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/30/26	Payee name Jennifer Longoria	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 403 Basswood San Antonio, TX 78213	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Field
	<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

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 1/30/26	5 Payee name Cole Bowles
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6 Amount (\$) \$1,900.00	7 Payee address; 1 Camino Santa Maria #319-B	City; San Antonio, TX	State; TX	Zip Code 78228
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Outreach
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/30/26	Payee name Bexar County Democratic Party
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Amount (\$) \$175.00	Payee address; 1844 Fredericksburg Rd	City; San Antonio TX	State; TX	Zip Code 78201
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Sponsorship
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/30/26	Payee name Amanda Martinez
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Amount (\$) \$750.00	Payee address; 1212 Keats	City; San Antonio TX	State; TX	Zip Code 78211
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<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

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 1/30/26	5 Payee name Courtney Lopez	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 735 Gladstone San Antonio TX 78225	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/30/26	Payee name Giselle Martinez	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 604 El Dorado San Antonio TX 78225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/30/26	Payee name Eddie Martinez	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 604 El Dorado San Antonio TX 78225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY 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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 1/30/26	5 Payee name Starla Martinez	
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code 5606 Tranquil Dawn San Antonio TX 78218	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/30/26	Payee name Abcde Martinez	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 5606 Tranquil Dawn San Antonio TX 78218	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 1/30/26	Payee name CSG, Inc	
Amount (\$) \$9,233.25	Payee address; City; State; Zip Code 212 W Laurel San Antonio TX 78212	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Collateral
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY 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

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 1/30/26	5 Payee name CSG, Inc
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6 Amount (\$) \$39,825.00	7 Payee address; 212 W Laurel	City; San Antonio TX	State; TX	Zip Code 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Digital advertising
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/30/26	Payee name OfficeMax
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Amount (\$) \$55.84	Payee address; 150 N. Crossroads Blvd	City; Balcones Heights TX	State; TX	Zip Code 78201
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/30/26	Payee name Walmart
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Amount (\$) \$112.54	Payee address; 918 Bandera Rd	City; San Antonio TX	State; TX	Zip Code 78228
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead	Description Supplies
	<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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 1/30/26	5 Payee name City of San Antonio
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6 Amount (\$) \$15.00	7 Payee address; 514 W. Commerce	City; San Antonio TX	State; TX	Zip Code 78207
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Parking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 1/30/26	Payee name Frank Martinez
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Amount (\$) \$150.00	Payee address; 1212 Keats	City; San Antonio TX	State; TX	Zip Code 78211
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/2/26	Payee name Anedot
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Amount (\$) \$40.30	Payee address; 3723 Greenville Ave Ste 41002	City; Dallas, TX	State; TX	Zip Code 75206
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY 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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 2/3/26	5 Payee name Anedot
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6 Amount (\$) \$41.98	7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Credit card processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/4/26	Payee name Anedot
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Amount (\$) \$21.15	Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/5/26	Payee name Anedot
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Amount (\$) \$147.18	Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/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 F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 2/6/26	5 Payee name Anedot	
6 Amount (\$) \$187.39	7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Credit card processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/7/26	Payee name Anedot	
Amount (\$) \$4.48	Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/10/26	Payee name Anedot	
Amount (\$) \$20.30	Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 2/10/26	5 Payee name CSG
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6 Amount (\$) \$8,593.64	7 Payee address; 212 W Laurel	City; San Antonio TX	State; TX	Zip Code 78212
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Collateral
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/10/26	Payee name CSG
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Amount (\$) \$13,275.00	Payee address; 212 W Laurel	City; San Antonio TX	State; TX	Zip Code 78212
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Digital Advertising
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/10/26	Payee name CSG
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Amount (\$) \$109,248.80	Payee address; 212 W Laurel	City; San Antonio TX	State; TX	Zip Code 78212
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Direct Mail
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY 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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 2/11/26	5 Payee name Anedot
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6 Amount (\$) \$10.73	7 Payee address; 3723 Greenville Ave Ste 41002	City; Dallas, TX	State; TX	Zip Code 75206
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Credit card processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/11/26	Payee name Leonard Jaramillo
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Amount (\$) \$811.88	Payee address; PO Box 241018	City; San Antonio, TX	State; TX	Zip Code 78224
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Refund for 1/12/26 in-kind
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/13/26	Payee name Anedot
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Amount (\$) \$10.73	Payee address; 3723 Greenville Ave Ste 41002	City; Dallas, TX	State; TX	Zip Code 75206
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 2/14/26	5 Payee name Anedot	
6 Amount (\$) \$73.86	7 Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Credit card processing fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/15/26	Payee name Anedot	
Amount (\$) \$52.71	Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/16/26	Payee name Anedot	
Amount (\$) \$10.73	Payee address; City; State; Zip Code 3723 Greenville Ave Ste 41002 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Credit card processing fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 2/21/26	5 Payee name Amanda Martinez	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1212 Keats San Antonio TX 78211	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/21/26	Payee name Courtney Lopez	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 735 Gladstone San Antonio TX 78225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/21/26	Payee name Giselle Martinez	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 604 El Dorado San Antonio TX 78225	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY 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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
4 Date 2/21/26	5 Payee name Eddie Martinez	
6 Amount (\$) \$500.00	7 Payee address; 604 El Dorado	City; State; Zip Code San Antonio TX 78225
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/21/26	Payee name Starla Martinez	
Amount (\$) \$500.00	Payee address; 5606 Tranquil Dawn	City; State; Zip Code San Antonio TX 78218
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/21/26	Payee name Abcde Martinez	
Amount (\$) \$500.00	Payee address; 5606 Tranquil Dawn	City; State; Zip Code San Antonio TX 78218
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY 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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 2/21/26	5 Payee name Frank Martinez
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6 Amount (\$) \$500.00	7 Payee address; 5606 Tranquil Dawn	City; San Antonio TX	State; TX	Zip Code 78218
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/21/26	Payee name Lisa Montana
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Amount (\$) \$500.00	Payee address; 915 Big Leaf Rd	City; San Antonio TX	State; TX	Zip Code 78264
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/21/26	Payee name Ally Tamez
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Amount (\$) \$800.00	Payee address; 4334 North Hein Rd	City; San Antonio TX	State; TX	Zip Code 78220
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 2/21/26	5 Payee name Jacob Romo
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6 Amount (\$) \$400.00	7 Payee address; 403 Basswood	City; San Antonio, TX	State; TX	Zip Code 78213
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Blockwalking
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/21/26	Payee name Alec Romo
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Amount (\$) \$400.00	Payee address; 2214 Spicewood Dr	City; San Antonio TX	State; TX	Zip Code 78213
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Blockwalking
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/21/26	Payee name Letty Barolia
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Amount (\$) \$200.00	Payee address; 20222 Grail Quest	City; San Antonio TX	State; TX	Zip Code 78258
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Makeup for ad shoot
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY 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

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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1 Total pages Schedule F1: 18	2 FILER NAME Luz Elena Chapa	3 Filer ID (Ethics Commission Filers)
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4 Date 2/21/26	5 Payee name Jerstad Photographics LP
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6 Amount (\$) \$400.00	7 Payee address; PO Box 160021	City; San Antonio TX	State; TX	Zip Code 78280
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Photography
	(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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/21/26	Payee name Pescador Public Strategies
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Amount (\$) \$13,000.00	Payee address; 4700 McCullough Ste 168	City; San Antonio TX	State; TX	Zip Code 78212
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising expense	Description Digital advertising
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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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 ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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