

# 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                                                                                                                                                                                       | 2 Total pages filed:<br>90 |
| 3 CANDIDATE / OFFICEHOLDER NAME                                                              | MS / MRS / MR FIRST MI<br>Ron                                                                                                                                                                                                                                                                                                                                                                                                      | OFFICE USE ONLY<br>Date Received<br>2026 JUL 15 PM 12:18<br>BEXAR COUNTY ELECTIONS ADMINISTRATOR<br>FILED IN MY OFFICE<br>NOT RECORDED<br>FILED IN MY OFFICE<br>NOT RECORDED                     |                            |
|                                                                                              | NICKNAME LAST SUFFIX<br>Nirenberg                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                  |                            |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS<br><br><input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE<br>PO Box 12072<br><br>San Antonio, TX 78212                                                                                                                                                                                                                                                                                                                                       | Date Hand-delivered or Date Postmarked                                                                                                                                                           | 57                         |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                    | Receipt # Amount                                                                                                                                                                                 |                            |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date Processed                                                                                                                                                                                   |                            |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date Imaged                                                                                                                                                                                      |                            |
| 5 CAMPAIGN TREASURER NAME                                                                    | MS / MRS / MR FIRST MI<br>Jorge                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                  |                            |
|                                                                                              | NICKNAME LAST SUFFIX<br>Herrera                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                  |                            |
| 6 CAMPAIGN TREASURER ADDRESS<br><br>(Residence or Business)                                  | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE<br><br>1800 W. Commerce St. San Antonio TX 78207                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                  |                            |
| 7 CAMPAIGN TREASURER PHONE                                                                   | AREA CODE PHONE NUMBER EXTENSION<br><br>(210) 227-1054                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                  |                            |
| 8 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)<br><input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR) |                                                                                                                                                                                                  |                            |
| 9 PERIOD COVERED                                                                             | Month Day Year    THROUGH    Month Day Year<br>02/22/2026    06/30/2026                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                  |                            |
| 10 ELECTION                                                                                  | ELECTION DATE<br>Month Day Year<br>03/03/2026                                                                                                                                                                                                                                                                                                                                                                                      | ELECTION TYPE<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other<br><input type="checkbox"/> General <input type="checkbox"/> Special |                            |
|                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                  |                            |
| 11 OFFICE                                                                                    | OFFICE HELD (if any)<br>None                                                                                                                                                                                                                                                                                                                                                                                                       | 12 OFFICE SOUGHT (if known)<br>Bexar County Judge                                                                                                                                                |                            |

GO TO PAGE 2



# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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|                                  |             |
|----------------------------------|-------------|
| 13 C / OH NAME<br>Nirenberg, Ron | 14 Filer ID |
|----------------------------------|-------------|

|                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                |                   |
|----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S)<br><br><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. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> 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                                                   |                                                                                                                                                                                                                                                                                                                                                                                                |                   |

|                         |                                                                                                                                       |               |
|-------------------------|---------------------------------------------------------------------------------------------------------------------------------------|---------------|
| 16 CONTRIBUTION TOTALS  | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ 0.00       |
|                         | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)                                                  | \$ 210,265.00 |
| EXPENDITURE TOTALS      | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES                                                                                            | \$ 0.00       |
|                         | 4. TOTAL POLITICAL EXPENDITURES                                                                                                       | \$ 414,984.29 |
| CONTRIBUTION BALANCE    | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD                                                | \$ 66,585.20  |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD                                         | \$ 50,000.00  |

17 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.





Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Ron Nirenberg, this the 15th day of July, 2026, to certify which, witness my hand and seal of office.



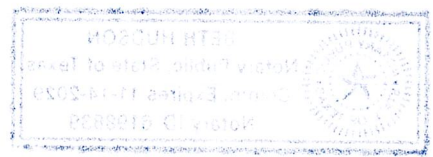
Signature of officer administering

Beth Hudson

Printed name of officer administering

Notary Public

Title of officer administering oath



**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

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**18 FILER NAME**

Nirenberg, Ron

**19 Filer ID****20 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE

SUBTOTAL AMOUNT

- |     |                                                                                                             |               |
|-----|-------------------------------------------------------------------------------------------------------------|---------------|
| 1.  | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                           | \$ 160,265.00 |
| 2.  | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS             | \$ 50,000.00  |
| 3.  | <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS                                                  | \$            |
| 4.  | <input type="checkbox"/> SCHEDULE E: LOANS                                                                  | \$            |
| 5.  | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS        | \$ 414,984.29 |
| 6.  | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                           | \$            |
| 7.  | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS                  | \$            |
| 8.  | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                      | \$            |
| 9.  | <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS                             | \$            |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH             | \$            |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS                | \$            |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$            |



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                     |                                                                                                                                                                                                                      |                                                          |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>    |                                                                                                                                                                                                                      | <b>1</b> Total pages Schedule A1:<br>Sch: 1/30 Rpt: 4/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                               |                                                                                                                                                                                                                      | <b>3</b> Filer ID                                        |
| <b>4</b> Date<br>06/08/2026                                         | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>ACEC SA PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>409 Oak Glen Dr<br><br>San Antonio, TX 78209 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00   |
| <b>8</b> Principal occupation / Job title (See Instructions)        |                                                                                                                                                                                                                      | <b>9</b> Employer (See Instructions)                     |
| Date<br>04/13/2026                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Acosta, Luis<br><hr/> Contributor address; City; State; Zip Code<br>4006 Greensboro Dr<br><br>San Antonio, TX 78229               | Amount of Contribution (\$)<br><br>\$2,500.00            |
| Principal occupation / Job title (See Instructions)<br>Restaurateur |                                                                                                                                                                                                                      | Employer (See Instructions)<br>Acosta Mgmt.              |
| Date<br>05/27/2026                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Agather, John<br><hr/> Contributor address; City; State; Zip Code<br>300 W French Pl<br><br>San Antonio, TX 78212                 | Amount of Contribution (\$)<br><br>\$2,500.00            |
| Principal occupation / Job title (See Instructions)<br>Musician     |                                                                                                                                                                                                                      | Employer (See Instructions)<br>Self                      |
| Date<br>04/13/2026                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Aleman, John Rick<br><hr/> Contributor address; City; State; Zip Code<br>717 W Ashby Pl<br><br>San Antonio, TX 78212              | Amount of Contribution (\$)<br><br>\$2,500.00            |
| Principal occupation / Job title (See Instructions)<br>Self         |                                                                                                                                                                                                                      | Employer (See Instructions)<br>Self                      |
| Date<br>05/22/2026                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Allen, Taylor<br><hr/> Contributor address; City; State; Zip Code<br>755 E Mulberry Ave<br><br>San Antonio, TX 78212              | Amount of Contribution (\$)<br><br>\$250.00              |
| Principal occupation / Job title (See Instructions)<br>Engineer     |                                                                                                                                                                                                                      | Employer (See Instructions)<br>WGI                       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 2/30 Rpt: 5/90

**2** FILER NAME

Nirenberg, Ron

**3** Filer ID

**4** Date  
02/27/2026

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Ameduri, Maria

**6** Contributor address; City; State; Zip Code  
179 Paddington Way  
  
San Antonio, TX 78209

**7** Amount of Contribution (\$)  
  
\$250.00

**8** Principal occupation / Job title (See Instructions)  
Retired

**9** Employer (See Instructions)  
N/A

Date  
04/09/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Arechiga, Jason

Contributor address; City; State; Zip Code  
22603 Impala Bnd  
  
San Antonio, TX 78259

Amount of Contribution (\$)  
  
\$2,500.00

Principal occupation / Job title (See Instructions)  
Real estate developer

Employer (See Instructions)  
The NRP Group

Date  
04/20/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Bain III, Henry Carl

Contributor address; City; State; Zip Code  
15802 Deer Crst  
  
San Antonio, TX 78248

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

Principal occupation / Job title (See Instructions)  
Exec. VP

Employer (See Instructions)  
Bain Medina Bain

Date  
06/03/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Barrett, Daniel Thomas

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

Amount of Contribution (\$)  
  
\$500.00

Principal occupation / Job title (See Instructions)  
President & CEO

Employer (See Instructions)  
Barrett Insurance Services

Date  
05/19/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Barros, Marco

Contributor address; City; State; Zip Code  
14018 Sage Blf  
  
San Antonio, TX 78216

Amount of Contribution (\$)  
  
\$100.00

Principal occupation / Job title (See Instructions)  
Owner

Employer (See Instructions)  
Marco Management



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 3/30 Rpt: 6/90

2 FILER NAME

Nirenberg, Ron

3 Filer ID

4 Date

04/13/2026

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Basaldua, Paul

7 Amount of Contribution (\$)

\$1,000.00

6 Contributor address; City; State; Zip Code

24 Inwood Mnr

San Antonio, TX 78248

8 Principal occupation / Job title (See Instructions)

Real Estate

9 Employer (See Instructions)

VersaTerra

Date

02/22/2026

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bedoy, Patricia

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

5114 Queen Bess Ct

San Antonio, TX 78228

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

Bedoys Bakery

Date

02/22/2026

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bedoy, Patricia

Amount of Contribution (\$)

\$250.00

Contributor address; City; State; Zip Code

5114 Queen Bess Ct

San Antonio, TX 78228

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

Bedoys Bakery

Date

05/19/2026

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Beebe, Todd

Amount of Contribution (\$)

\$500.00

Contributor address; City; State; Zip Code

1727 Corita St

San Antonio, TX 78209

Principal occupation / Job title (See Instructions)

Real estate agent

Employer (See Instructions)

Hogan Investments

Date

03/17/2026

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Benavidez, Cristian

Amount of Contribution (\$)

\$25.00

Contributor address; City; State; Zip Code

2701 Calvert St NW Apt 1023

Washington, DC 20008

Principal occupation / Job title (See Instructions)

Student

Employer (See Instructions)

University

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 4/30 Rpt: 7/90

**2** FILER NAME  
Nirenberg, Ron

**3** Filer ID

**4** Date  
03/08/2026

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Brackman, Bob

**7** Amount of Contribution (\$)  
\$50.00

**6** Contributor address; City; State; Zip Code  
3405 Benham Ave  
  
Nashville, TN 37215

**8** Principal occupation / Job title (See Instructions)  
Not Employed

**9** Employer (See Instructions)  
Not Employed

Date  
05/26/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Brimhall, Peggy

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
515 Leigh St  
  
San Antonio, TX 78210

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Able City Communities

Date  
06/03/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Brown & McDonald PLLC

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

Contributor address; City; State; Zip Code  
100 NE Loop 410 Ste 1365  
  
San Antonio, TX 78216

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/27/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Burdine, James

Amount of Contribution (\$)  
\$2,500.00

Contributor address; City; State; Zip Code  
27211 Timberline Dr  
  
San Antonio, TX 78260

Principal occupation / Job title (See Instructions)  
Logistics

Employer (See Instructions)  
Pyramid Group

Date  
03/09/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Burney, Frank

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

Contributor address; City; State; Zip Code  
112 E Pecan St Ste 1616  
  
San Antonio, TX 78205

Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Martin & Drought P.C.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                  |                                                                                                                                                                                                                               |                                                               |
|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b> |                                                                                                                                                                                                                               | <b>1</b> Total pages Schedule A1:<br>Sch: 5/30 Rpt: 8/90      |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                            |                                                                                                                                                                                                                               | <b>3</b> Filer ID                                             |
| <b>4</b> Date<br>03/09/2026                                      | <b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002089 )<br>CWA PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>501 3rd St NW<br><br>Washington, DC 20001 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,000.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)     |                                                                                                                                                                                                                               | <b>9</b> Employer (See Instructions)                          |
| Date<br>06/03/2026                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: )<br>Cedillo, Ricardo<br><hr/> Contributor address; City; State; Zip Code<br>3202 Goldsboro St<br><br>San Antonio, TX 78230                          | Amount of Contribution (\$)<br><br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)<br>attorney  |                                                                                                                                                                                                                               | Employer (See Instructions)<br>Davis, Cedillo & Mendoza, Inc. |
| Date<br>05/01/2026                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: )<br>Cheng, Dennis<br><hr/> Contributor address; City; State; Zip Code<br>261 W 25th St Apt 10C<br><br>New York, NY 10001                            | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Principal |                                                                                                                                                                                                                               | Employer (See Instructions)<br>Cheng Strategies               |
| Date<br>05/17/2026                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: )<br>Ciaravino, Anthony<br><hr/> Contributor address; City; State; Zip Code<br>3341 Green Spg<br><br>San Antonio, TX 78247                           | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Teacher   |                                                                                                                                                                                                                               | Employer (See Instructions)<br>Keystone School                |
| Date<br>04/13/2026                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: )<br>Cinco Developers LP<br><hr/> Contributor address; City; State; Zip Code<br>8008 W Military Dr<br><br>San Antonio, TX 78227                      | Amount of Contribution (\$)<br><br>\$2,000.00                 |
| Principal occupation / Job title (See Instructions)              |                                                                                                                                                                                                                               | Employer (See Instructions)                                   |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 6/30 Rpt: 9/90

**2** FILER NAME  
Nirenberg, Ron

**3** Filer ID

**4** Date  
05/19/2026

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Clark, Angela

**7** Amount of Contribution (\$)  
\$1,000.00

**6** Contributor address; City; State; Zip Code  
505 E Mandalay Dr  
  
San Antonio, TX 78212

**8** Principal occupation / Job title (See Instructions)  
self

**9** Employer (See Instructions)  
self

Date  
03/04/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Coleman, Charles

Amount of Contribution (\$)  
\$25.00

Contributor address; City; State; Zip Code  
10303 Crystal Fld  
  
San Antonio, TX 78254

Principal occupation / Job title (See Instructions)  
Not Employed

Employer (See Instructions)  
Not Employed

Date  
02/27/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Cornell, Dan

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
242 Cave Ln  
  
San Antonio, TX 78209

Principal occupation / Job title (See Instructions)  
Entrepreneur

Employer (See Instructions)  
Dan Cornell

Date  
03/04/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Crawford, Marta

Amount of Contribution (\$)  
\$15.00

Contributor address; City; State; Zip Code  
2310 Tristan Run  
  
San Antonio, TX 78259

Principal occupation / Job title (See Instructions)  
Not Employed

Employer (See Instructions)  
Not Employed

Date  
04/04/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Crawford, Marta

Amount of Contribution (\$)  
\$15.00

Contributor address; City; State; Zip Code  
2310 Tristan Run  
  
San Antonio, TX 78259

Principal occupation / Job title (See Instructions)  
Not Employed

Employer (See Instructions)  
Not Employed

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

|                                                                              |                                                                                                                                                                                                                       |                                                           |
|------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>             |                                                                                                                                                                                                                       | <b>1</b> Total pages Schedule A1:<br>Sch: 7/30 Rpt: 10/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                        |                                                                                                                                                                                                                       | <b>3</b> Filer ID                                         |
| <b>4</b> Date<br>06/04/2026                                                  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Crawford, Marta<br><b>6</b> Contributor address; City; State; Zip Code<br>2310 Tristan Run<br>San Antonio, TX 78259       | <b>7</b> Amount of Contribution (\$)<br>\$15.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |                                                                                                                                                                                                                       | <b>9</b> Employer (See Instructions)<br>Not Employed      |
| Date<br>05/04/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Crawford, Marta<br>Contributor address; City; State; Zip Code<br>2310 Tristan Run<br>San Antonio, TX 78259                         | Amount of Contribution (\$)<br>\$15.00                    |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Not Employed               |
| Date<br>06/03/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Democratic Women of Comal County<br>Contributor address; City; State; Zip Code<br>1592 W San Antonio St<br>New Braunfels, TX 78130 | Amount of Contribution (\$)<br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)                          |                                                                                                                                                                                                                       | Employer (See Instructions)                               |
| Date<br>02/25/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Denton, Laddie<br>Contributor address; City; State; Zip Code<br>11 Lynn Batts Ln Ste 100<br>San Antonio, TX 78218                  | Amount of Contribution (\$)<br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)<br>CEO                   |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Bitterblue                 |
| Date<br>04/08/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Dominguez, Jeffrey<br>Contributor address; City; State; Zip Code<br>3112 Windsor Rd # A143<br>Austin, TX 78703                     | Amount of Contribution (\$)<br>\$500.00                   |
| Principal occupation / Job title (See Instructions)<br>Entrepreneur          |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Self                       |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 8/30 Rpt: 11/90

**2** FILER NAME  
Nirenberg, Ron

**3** Filer ID

**4** Date  
03/09/2026

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Dreiss, Pamala & Taylor

**7** Amount of Contribution (\$)  
\$2,000.00

**6** Contributor address; City; State; Zip Code  
3 Imperial Oaks  
  
San Antonio, TX 78248

**8** Principal occupation / Job title (See Instructions)  
Director

**9** Employer (See Instructions)  
Director for Crosier Longs

Date  
03/03/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Edwards, Geof

Amount of Contribution (\$)  
\$3,000.00

Contributor address; City; State; Zip Code  
232 W Hermosa Dr  
  
San Antonio, TX 78212

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
Alta Architects

Date  
04/13/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Edwards, Geof

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

Contributor address; City; State; Zip Code  
232 W Hermosa Dr  
  
San Antonio, TX 78212

Principal occupation / Job title (See Instructions)  
Architect

Employer (See Instructions)  
Alta Architects

Date  
05/26/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Etheredge, Caleb

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
535 Leigh St  
  
San Antonio, TX 78210

Principal occupation / Job title (See Instructions)  
Landscape Architect

Employer (See Instructions)  
Coral Studio

Date  
06/26/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Falic, Jerome

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

Contributor address; City; State; Zip Code  
6100 Hollywood Blvd Fl 7 7th Floor  
  
Hollywood, FL 33024

Principal occupation / Job title (See Instructions)  
Principal

Employer (See Instructions)  
Duty Free America

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                           |                                                                                                                                                                                                                          |                                                           |
|---------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>          |                                                                                                                                                                                                                          | <b>1</b> Total pages Schedule A1:<br>Sch: 9/30 Rpt: 12/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                     |                                                                                                                                                                                                                          | <b>3</b> Filer ID                                         |
| <b>4</b> Date<br>06/26/2026                                               | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Falic, Simon<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>6100 Pines Blvd<br><br>Pembroke Pines, FL 33024 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00    |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Executive |                                                                                                                                                                                                                          | <b>9</b> Employer (See Instructions)<br>Falic Investments |
| Date<br>03/19/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Feik, John<br><hr/> Contributor address; City; State; Zip Code<br>727 Elizabeth Rd<br><br>San Antonio, TX 78209                       | Amount of Contribution (\$)<br><br>\$1,000.00             |
| Principal occupation / Job title (See Instructions)<br>Self               |                                                                                                                                                                                                                          | Employer (See Instructions)<br>Self                       |
| Date<br>06/02/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Fisher, Joe<br><hr/> Contributor address; City; State; Zip Code<br>24603 Birdie Rdg<br><br>San Antonio, TX 78260                      | Amount of Contribution (\$)<br><br>\$1,000.00             |
| Principal occupation / Job title (See Instructions)<br>President/CEO      |                                                                                                                                                                                                                          | Employer (See Instructions)<br>Hallmark University        |
| Date<br>04/08/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Foster, Paul<br><hr/> Contributor address; City; State; Zip Code<br>1815 Fieldstone Rd<br><br>San Antonio, TX 78232                   | Amount of Contribution (\$)<br><br>\$250.00               |
| Principal occupation / Job title (See Instructions)<br>Pres.              |                                                                                                                                                                                                                          | Employer (See Instructions)<br>Foster CM Group            |
| Date<br>03/04/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Foster, Paul W<br><hr/> Contributor address; City; State; Zip Code<br>2304 San Jose Way<br><br>Canyon Lake, TX 78133                  | Amount of Contribution (\$)<br><br>\$250.00               |
| Principal occupation / Job title (See Instructions)<br>President / CEO    |                                                                                                                                                                                                                          | Employer (See Instructions)<br>Foster CM Group Inc        |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 10/30 Rpt: 13/90

**2** FILER NAME  
Nirenberg, Ron

**3** Filer ID

**4** Date  
04/22/2026

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Fraser, Susan

**7** Amount of Contribution (\$)  
\$250.00

**6** Contributor address; City; State; Zip Code  
1614 Norfolk St Apt A  
Houston, TX 77006

**8** Principal occupation / Job title (See Instructions)  
Civil Engineer

**9** Employer (See Instructions)  
WSP USA

Date  
02/27/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Frederick, Joan

Amount of Contribution (\$)  
\$50.00

Contributor address; City; State; Zip Code  
PO Box 701132  
San Antonio, TX 78270

Principal occupation / Job title (See Instructions)  
self

Employer (See Instructions)  
Joan Frederick Studio

Date  
02/27/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Garza, Alma

Amount of Contribution (\$)  
\$100.00

Contributor address; City; State; Zip Code  
1503 W Huisache Ave  
San Antonio, TX 78201

Principal occupation / Job title (See Instructions)  
Retired

Employer (See Instructions)  
N/A

Date  
04/08/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Garza, Rudy

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

Contributor address; City; State; Zip Code  
757 Treaty Oak  
San Antonio, TX 78258

Principal occupation / Job title (See Instructions)  
Mgmt

Employer (See Instructions)  
CPS Energy

Date  
02/25/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Gentry, Barbara

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

Contributor address; City; State; Zip Code  
104 Hiler Rd  
San Antonio, TX 78209

Principal occupation / Job title (See Instructions)  
Not Employed

Employer (See Instructions)  
Not Employed



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                              |                                                                                                                                                                                                                            |                                                            |
|------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>             |                                                                                                                                                                                                                            | <b>1</b> Total pages Schedule A1:<br>Sch: 11/30 Rpt: 14/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                        |                                                                                                                                                                                                                            | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>02/27/2026                                                  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Giarritta, Sunny Day<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>PO Box 17572<br><br>San Antonio, TX 78217 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Manager      |                                                                                                                                                                                                                            | <b>9</b> Employer (See Instructions)<br>RPM Living         |
| Date<br>03/04/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Gonzalez, Adela<br><hr/> Contributor address; City; State; Zip Code<br>18610 Tuscany Stone Apt 1419<br><br>San Antonio, TX 78258        | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Retired               |                                                                                                                                                                                                                            | Employer (See Instructions)<br>N/A                         |
| Date<br>04/07/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Guerrero, Debra<br><hr/> Contributor address; City; State; Zip Code<br>3915 Skylark Ave<br><br>San Antonio, TX 78210                    | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Real Estate Developer |                                                                                                                                                                                                                            | Employer (See Instructions)<br>The NRP Group               |
| Date<br>03/13/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Guido, Thomas<br><hr/> Contributor address; City; State; Zip Code<br>701 Elizabeth Rd<br><br>San Antonio, TX 78209                      | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>President             |                                                                                                                                                                                                                            | Employer (See Instructions)<br>Guido Bros. Construction    |
| Date<br>04/20/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hamilton, Dwayne<br><hr/> Contributor address; City; State; Zip Code<br>531 Canyon Rise<br><br>San Antonio, TX 78258                    | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Civil Engineer        |                                                                                                                                                                                                                            | Employer (See Instructions)<br>Maestas & Associates LLC    |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                             |                                                                                                                                                                                                                           |                                                            |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>            |                                                                                                                                                                                                                           | <b>1</b> Total pages Schedule A1:<br>Sch: 12/30 Rpt: 15/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                       |                                                                                                                                                                                                                           | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>04/07/2026                                                 | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Heller, David<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>2165 E Maya Palm Dr<br><br>Boca Raton, FL 33432 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,500.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Real Estate |                                                                                                                                                                                                                           | <b>9</b> Employer (See Instructions)<br>The NRP            |
| Date<br>02/26/2026                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Jorge<br><hr/> Contributor address; City; State; Zip Code<br>1800 W Commerce St<br><br>San Antonio, TX 78207                  | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Attorney             |                                                                                                                                                                                                                           | Employer (See Instructions)<br>The Herrera Law Firm        |
| Date<br>02/26/2026                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Herrera, Jorge<br><hr/> Contributor address; City; State; Zip Code<br>1800 W Commerce St<br><br>San Antonio, TX 78207                  | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Attorney             |                                                                                                                                                                                                                           | Employer (See Instructions)<br>The Herrera Law Firm        |
| Date<br>03/20/2026                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Howard, Tarawanda<br><hr/> Contributor address; City; State; Zip Code<br>7701 Marco Crst<br><br>San Antonio, TX 78233                  | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed         |                                                                                                                                                                                                                           | Employer (See Instructions)<br>Not Employed                |
| Date<br>04/07/2026                                                          | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hunter, William<br><hr/> Contributor address; City; State; Zip Code<br>4848 Sinclair Rd<br><br>San Antonio, TX 78222                   | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Executive            |                                                                                                                                                                                                                           | Employer (See Instructions)<br>Pesado Construction Company |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                              |                                                                                                                                                                                                                                 |                                                                        |
|------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>             |                                                                                                                                                                                                                                 | <b>1</b> Total pages Schedule A1:<br>Sch: 13/30 Rpt: 16/90             |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                        |                                                                                                                                                                                                                                 | <b>3</b> Filer ID                                                      |
| <b>4</b> Date<br>02/27/2026                                                  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Hurley, Patrick Joseph<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>19910 Terra Cyn<br><br>San Antonio, TX 78255 | <b>7</b> Amount of Contribution (\$)<br><br>\$250.00                   |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Area Manager |                                                                                                                                                                                                                                 | <b>9</b> Employer (See Instructions)<br>Highland Commercial Properties |
| Date<br>04/08/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jamison, Jelynn<br><hr/> Contributor address; City; State; Zip Code<br>18903 Calle Cierra<br><br>San Antonio, TX 78258                       | Amount of Contribution (\$)<br><br>\$250.00                            |
| Principal occupation / Job title (See Instructions)<br>CEO                   |                                                                                                                                                                                                                                 | Employer (See Instructions)<br>Center for Health Care Services         |
| Date<br>04/20/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Jaramillo, Hernan<br><hr/> Contributor address; City; State; Zip Code<br>6035 Watertown<br><br>San Antonio, TX 78249                         | Amount of Contribution (\$)<br><br>\$1,000.00                          |
| Principal occupation / Job title (See Instructions)<br>President             |                                                                                                                                                                                                                                 | Employer (See Instructions)<br>Bain Medina Bain, Inc.                  |
| Date<br>04/13/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Joeris, Gary<br><hr/> Contributor address; City; State; Zip Code<br>823 Arion Pkwy<br><br>San Antonio, TX 78216                              | Amount of Contribution (\$)<br><br>\$5,000.00                          |
| Principal occupation / Job title (See Instructions)<br>General contractor    |                                                                                                                                                                                                                                 | Employer (See Instructions)<br>Joeris General Contractors, Ltd         |
| Date<br>02/27/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Johnson, Jeremiah<br><hr/> Contributor address; City; State; Zip Code<br>6071 Akin Cir<br><br>San Antonio, TX 78261                          | Amount of Contribution (\$)<br><br>\$10.00                             |
| Principal occupation / Job title (See Instructions)<br>Student               |                                                                                                                                                                                                                                 | Employer (See Instructions)<br>N/A                                     |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 14/30 Rpt: 17/90

**2** FILER NAME  
Nirenberg, Ron

**3** Filer ID

**4** Date  
06/12/2026

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Jordan, Perry

**7** Amount of Contribution (\$)  
\$100.00

**6** Contributor address; City; State; Zip Code  
17 Stoneleigh Way  
  
San Antonio, TX 78218

**8** Principal occupation / Job title (See Instructions)  
Not Employed

**9** Employer (See Instructions)  
Not Employed

Date  
02/24/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kazmi, Reyahd

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

Contributor address; City; State; Zip Code  
916 S Bell Ave  
  
Chicago, IL 60612

Principal occupation / Job title (See Instructions)  
City Clerk

Employer (See Instructions)  
City of Chicago

Date  
02/25/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kestenbaum, David

Amount of Contribution (\$)  
\$2,500.00

Contributor address; City; State; Zip Code  
206 Wellesley Wood  
  
Shavano Park, TX 78231

Principal occupation / Job title (See Instructions)  
Co-founder and CFO

Employer (See Instructions)  
Cauldron

Date  
02/26/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Knight, Robert

Amount of Contribution (\$)  
\$100.00

Contributor address; City; State; Zip Code  
315 Refugio St  
  
San Antonio, TX 78210

Principal occupation / Job title (See Instructions)  
Sales

Employer (See Instructions)  
ARC

Date  
03/01/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Kostecki, Jodi

Amount of Contribution (\$)  
\$2,500.00

Contributor address; City; State; Zip Code  
102 Caladium Dr  
  
San Antonio, TX 78213

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
BR

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                           |                                                                                                                                                                                                                       |                                                            |
|---------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>          |                                                                                                                                                                                                                       | <b>1</b> Total pages Schedule A1:<br>Sch: 15/30 Rpt: 18/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                     |                                                                                                                                                                                                                       | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>04/13/2026                                               | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Kothman, Jeffrey<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>326 Big Oak Dr<br><br>Adkins, TX 78101   | <b>7</b> Amount of Contribution (\$)<br>\$2,000.00         |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>President |                                                                                                                                                                                                                       | <b>9</b> Employer (See Instructions)<br>Texas Towing       |
| Date<br>06/12/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Leddy, Charles<br><hr/> Contributor address; City; State; Zip Code<br>324 Ridgemont Ave<br><br>San Antonio, TX 78209               | Amount of Contribution (\$)<br>\$5,000.00                  |
| Principal occupation / Job title (See Instructions)<br>Management         |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Escalera Capital            |
| Date<br>02/26/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Liberto, Rick<br><hr/> Contributor address; City; State; Zip Code<br>114 Camp St<br><br>San Antonio, TX 78204                      | Amount of Contribution (\$)<br>\$2,500.00                  |
| Principal occupation / Job title (See Instructions)<br>Business owner     |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Ricos Products Co           |
| Date<br>04/13/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Linebarger Goggan Blair & Simpson, LLP<br><hr/> Contributor address; City; State; Zip Code<br>PO Box 17428<br><br>Austin, TX 78760 | Amount of Contribution (\$)<br>\$5,000.00                  |
| Principal occupation / Job title (See Instructions)                       |                                                                                                                                                                                                                       | Employer (See Instructions)                                |
| Date<br>03/05/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Lopez, Gabriel<br><hr/> Contributor address; City; State; Zip Code<br>4230 Goshen Pass St<br><br>San Antonio, TX 78230             | Amount of Contribution (\$)<br>\$100.00                    |
| Principal occupation / Job title (See Instructions)<br>management         |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Jordan Foster Construction  |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                          |                                                                                                                                                                                                                         |                                                                       |
|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>         |                                                                                                                                                                                                                         | <b>1</b> Total pages Schedule A1:<br>Sch: 16/30 Rpt: 19/90            |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                    |                                                                                                                                                                                                                         | <b>3</b> Filer ID                                                     |
| <b>4</b> Date<br>03/05/2026                                              | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Maloney, Pat<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>239 E Commerce St<br><br>San Antonio, TX 78205 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00                |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney |                                                                                                                                                                                                                         | <b>9</b> Employer (See Instructions)<br>Law Offices of Pat Maloney Jr |
| Date<br>03/04/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Martin, jack<br><hr/> Contributor address; City; State; Zip Code<br>8310 FM 455<br><br>Montague, TX 76251                            | Amount of Contribution (\$)<br><br>\$5,000.00                         |
| Principal occupation / Job title (See Instructions)<br>Rancher           |                                                                                                                                                                                                                         | Employer (See Instructions)<br>JPM Ranch Company                      |
| Date<br>03/04/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Martin, patsy<br><hr/> Contributor address; City; State; Zip Code<br>8310 FM 455<br><br>Montague, TX 76251                           | Amount of Contribution (\$)<br><br>\$5,000.00                         |
| Principal occupation / Job title (See Instructions)<br>Rancher           |                                                                                                                                                                                                                         | Employer (See Instructions)<br>JPM Ranch Company                      |
| Date<br>03/04/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McAllister, Taddy<br><hr/> Contributor address; City; State; Zip Code<br>203 Terrell Rd<br><br>San Antonio, TX 78209                 | Amount of Contribution (\$)<br><br>\$250.00                           |
| Principal occupation / Job title (See Instructions)<br>Not Employed      |                                                                                                                                                                                                                         | Employer (See Instructions)<br>Not Employed                           |
| Date<br>06/03/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McCray, Pamela<br><hr/> Contributor address; City; State; Zip Code<br>11 Montivillers<br><br>San Antonio, TX 78257                   | Amount of Contribution (\$)<br><br>\$1,000.00                         |
| Principal occupation / Job title (See Instructions)<br>Not Employed      |                                                                                                                                                                                                                         | Employer (See Instructions)<br>Not Employed                           |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                                                         |                                                                                                                                                                                                                       |                                                            |
|---------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                                        |                                                                                                                                                                                                                       | <b>1</b> Total pages Schedule A1:<br>Sch: 17/30 Rpt: 20/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                   |                                                                                                                                                                                                                       | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>04/20/2026                                                                             | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>McGowan, Patrick<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>10902 Bar X Trl<br><br>Helotes, TX 78023 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Sr. VP and Mobility Operations Director |                                                                                                                                                                                                                       | <b>9</b> Employer (See Instructions)<br>WSP USA            |
| Date<br>05/19/2026                                                                                      | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Mery, George<br><hr/> Contributor address; City; State; Zip Code<br>105 Towne Vue Dr<br><br>San Antonio, TX 78213                  | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)<br>Executive                                        |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Meet investments inc        |
| Date<br>03/03/2026                                                                                      | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Munoz, Henry<br><hr/> Contributor address; City; State; Zip Code<br>1017 N Main Ave<br><br>San Antonio, TX 78212                   | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>CEO                                              |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Munoz & Company             |
| Date<br>04/13/2026                                                                                      | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Munoz, Henry<br><hr/> Contributor address; City; State; Zip Code<br>1017 N Main Ave<br><br>San Antonio, TX 78212                   | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)<br>CEO                                              |                                                                                                                                                                                                                       | Employer (See Instructions)<br>Munoz & Company             |
| Date<br>03/03/2026                                                                                      | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Nava, Alex<br><hr/> Contributor address; City; State; Zip Code<br>522 Possum Oak<br><br>Shavano Park, TX 78230                     | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Attorney                                         |                                                                                                                                                                                                                       | Employer (See Instructions)<br>ANG Law Firm                |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule A1:  
Sch: 18/30 Rpt: 21/90

**2** FILER NAME  
Nirenberg, Ron

**3** Filer ID

**4** Date  
05/26/2026

**5** Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Navarro, Maximiliano

**7** Amount of Contribution (\$)  
\$20.00

**6** Contributor address; City; State; Zip Code  
11215 Research Blvd  
  
Austin, TX 78759

**8** Principal occupation / Job title (See Instructions)  
President

**9** Employer (See Instructions)  
OpTech

Date  
05/26/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Operational Technologies Automotive

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
4100 NW Loop 410 Ste 230  
  
San Antonio, TX 78229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
04/13/2026

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

Amount of Contribution (\$)  
\$3,000.00

Contributor address; City; State; Zip Code  
112 E Pecan St Ste 1360  
  
San Antonio, TX 78205

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
02/27/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Parra, Eduardo

Amount of Contribution (\$)  
\$500.00

Contributor address; City; State; Zip Code  
28 Grantham Gln  
  
San Antonio, TX 78257

Principal occupation / Job title (See Instructions)  
Civil Engineer

Employer (See Instructions)  
Parra & Co

Date  
05/26/2026

Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Parra, Eduardo

Amount of Contribution (\$)  
\$25.00

Contributor address; City; State; Zip Code  
28 Grantham Gln  
  
San Antonio, TX 78257

Principal occupation / Job title (See Instructions)  
Civil Engineer

Employer (See Instructions)  
Parra & Co



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 19/55 Rpt: 53/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>Garcia, Barbara                                                                   |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$575.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>3144 Cenizo Road<br><br>San Antonio, TX 78264           |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                          |                                                                                                                                                                                                               |
| Candidate/Officeholder name Office sought Office held               |                                                                                                          |                                                                                                                                                                                                               |
| Date<br>02/27/2026                                                  | Payee name<br>Garcia, Jocelyn                                                                            |                                                                                                                                                                                                               |
| Amount (\$)<br>\$868.25                                             | Payee address; City; State; Zip Code<br>1696 Wald Rd., Lot #3<br><br>New Braunfels, TX 78132             |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                               |
| Candidate/Officeholder name Office sought Office held               |                                                                                                          |                                                                                                                                                                                                               |
| Date<br>03/04/2026                                                  | Payee name<br>Garcia, Jocelyn                                                                            |                                                                                                                                                                                                               |
| Amount (\$)<br>\$799.25                                             | Payee address; City; State; Zip Code<br>1696 Wald Rd., Lot #3<br><br>New Braunfels, TX 78132             |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                               |
| Candidate/Officeholder name Office sought Office held               |                                                                                                          |                                                                                                                                                                                                               |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                       |                                                                                                                                                                                                             |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 18/55 Rpt: 52/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                 | <b>3</b> Filer ID                                                                                                                                                                                           |
| <b>4</b> Date<br>05/29/2026                                         | <b>5</b> Payee name<br>Frost Bank                                                                     |                                                                                                                                                                                                             |
| <b>6</b> Amount (\$)<br>\$30.00                                     | <b>7</b> Payee address; City; State; Zip Code<br>111 Houston St. Ste 100<br><br>San Antonio, TX 78205 |                                                                                                                                                                                                             |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                       | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>wire transfer fee |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                       |                                                                                                                                                                                                             |
| Date<br>06/25/2026                                                  | Candidate/Officeholder name<br>Frost Bank                                                             | Office sought<br>Office held                                                                                                                                                                                |
| Amount (\$)<br>\$30.00                                              | Payee address; City; State; Zip Code<br>111 Houston St. Ste 100<br><br>San Antonio, TX 78205          |                                                                                                                                                                                                             |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Fees                              | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>wire transfer fee        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                       |                                                                                                                                                                                                             |
| Date<br>02/27/2026                                                  | Candidate/Officeholder name<br>Garcia, Barbara                                                        | Office sought<br>Office held                                                                                                                                                                                |
| Amount (\$)<br>\$684.25                                             | Payee address; City; State; Zip Code<br>3144 Cenizo Road<br><br>San Antonio, TX 78264                 |                                                                                                                                                                                                             |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor     | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                       |                                                                                                                                                                                                             |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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:<br>Sch: 17/55 Rpt: 51/90   |  | 2 FILER NAME<br>Nirenberg, Ron                                                                 |  | 3 Filer ID                                                                                                                                                                                           |  |
| 4 Date<br>02/25/2026                                  |  | 5 Payee name<br>Frost Bank                                                                     |  |                                                                                                                                                                                                      |  |
| 6 Amount (\$)<br>\$30.00                              |  | 7 Payee address; City; State; Zip Code<br>111 Houston St. Ste 100<br><br>San Antonio, TX 78205 |  |                                                                                                                                                                                                      |  |
| 8 PURPOSE OF EXPENDITURE                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking         |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>wire transfer fee |  |
| 9 Complete ONLY if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                    |  | Office sought Office held                                                                                                                                                                            |  |
| Date<br>03/30/2026                                    |  | Payee name<br>Frost Bank                                                                       |  |                                                                                                                                                                                                      |  |
| Amount (\$)<br>\$30.00                                |  | Payee address; City; State; Zip Code<br>111 Houston St. Ste 100<br><br>San Antonio, TX 78205   |  |                                                                                                                                                                                                      |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking         |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>wire transfer fee |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name                                                                    |  | Office sought Office held                                                                                                                                                                            |  |
| Date<br>02/27/2026                                    |  | Payee name<br>Frost Bank                                                                       |  |                                                                                                                                                                                                      |  |
| Amount (\$)<br>\$9.45                                 |  | Payee address; City; State; Zip Code<br>111 Houston St. Ste 100<br><br>San Antonio, TX 78205   |  |                                                                                                                                                                                                      |  |
| PURPOSE OF EXPENDITURE                                |  | (a) Category (See Categories listed at the top of this schedule)<br>Fees                       |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>service charge    |  |
| Complete ONLY if direct expenditure to benefit C/OH   |  | Candidate/Officeholder name                                                                    |  | Office sought Office held                                                                                                                                                                            |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 16/55 Rpt: 50/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/12/2026                                         | <b>5</b> Payee name<br>Facebook                                                                          |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$49.51                                     | <b>7</b> Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025                |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/27/2026                                                  | Payee name<br>Felix Ortiz, Mayra                                                                         |                                                                                                                                                                                                               |
| Amount (\$)<br>\$425.50                                             | Payee address; City; State; Zip Code<br>11138 Huebner Oaks, #517<br><br>San Antonio, TX 78230            |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/24/2026                                                  | Payee name<br>Frost Bank                                                                                 |                                                                                                                                                                                                               |
| Amount (\$)<br>\$30.00                                              | Payee address; City; State; Zip Code<br>111 Houston St. Ste 100<br><br>San Antonio, TX 78205             |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>wire transfer fee   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

|                                                                     |                                                                                                |                                                                                                                                                                                                            |
|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 15/55 Rpt: 49/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                          | <b>3</b> Filer ID                                                                                                                                                                                          |
| <b>4</b> Date<br>03/03/2026                                         | <b>5</b> Payee name<br>Facebook                                                                |                                                                                                                                                                                                            |
| <b>6</b> Amount (\$)<br>\$500.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025      |                                                                                                                                                                                                            |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                  |
| Date<br>03/03/2026                                                  | Payee name<br>Facebook                                                                         |                                                                                                                                                                                                            |
| Amount (\$)<br>\$500.00                                             | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025               |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                  |
| Date<br>03/04/2026                                                  | Payee name<br>Facebook                                                                         |                                                                                                                                                                                                            |
| Amount (\$)<br>\$500.00                                             | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025               |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                    | Office sought Office held                                                                                                                                                                                  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                            |                                                                                                                                   |                                                                                           |                                                                                                                                                                                                            |                   |
|------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 14/55 Rpt: 48/90 |                                                                                                                                   | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                     |                                                                                                                                                                                                            | <b>3</b> Filer ID |
| <b>4</b> Date<br>03/02/2026                                |                                                                                                                                   | <b>5</b> Payee name<br>Facebook                                                           |                                                                                                                                                                                                            |                   |
| <b>6</b> Amount (\$)<br>\$385.00                           |                                                                                                                                   | <b>7</b> Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025 |                                                                                                                                                                                                            |                   |
| <b>8</b> PURPOSE OF EXPENDITURE                            | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                                    |                                                                                           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads |                   |
|                                                            | <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate/Officeholder name Office sought Office held |                                                                                           |                                                                                                                                                                                                            |                   |
| Date<br>03/02/2026                                         |                                                                                                                                   | Payee name<br>Facebook                                                                    |                                                                                                                                                                                                            |                   |
| Amount (\$)<br>\$385.00                                    |                                                                                                                                   | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025          |                                                                                                                                                                                                            |                   |
| PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense                                           |                                                                                           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |                   |
|                                                            | Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate/Officeholder name Office sought Office held          |                                                                                           |                                                                                                                                                                                                            |                   |
| Date<br>03/02/2026                                         |                                                                                                                                   | Payee name<br>Facebook                                                                    |                                                                                                                                                                                                            |                   |
| Amount (\$)<br>\$385.00                                    |                                                                                                                                   | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025          |                                                                                                                                                                                                            |                   |
| PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense                                           |                                                                                           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |                   |
|                                                            | Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate/Officeholder name Office sought Office held          |                                                                                           |                                                                                                                                                                                                            |                   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                   |                                                                                                                                                                                                            |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 13/55 Rpt: 47/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                             | <b>3</b> Filer ID                                                                                                                                                                                          |
| <b>4</b> Date<br>02/25/2026                                         | <b>5</b> Payee name<br>Facebook                                                                   |                                                                                                                                                                                                            |
| <b>6</b> Amount (\$)<br>\$385.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025         |                                                                                                                                                                                                            |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                   |                                                                                                                                                                                                            |
| Date<br>02/26/2026                                                  | Candidate/Officeholder name<br>Payee name<br>Facebook                                             |                                                                                                                                                                                                            |
| Amount (\$)<br>\$385.00                                             | Office sought<br>Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025 |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                   |                                                                                                                                                                                                            |
| Date<br>02/27/2026                                                  | Candidate/Officeholder name<br>Payee name<br>Facebook                                             |                                                                                                                                                                                                            |
| Amount (\$)<br>\$385.00                                             | Office sought<br>Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025 |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                   |                                                                                                                                                                                                            |
| Date<br>02/27/2026                                                  | Candidate/Officeholder name<br>Payee name<br>Facebook                                             |                                                                                                                                                                                                            |
| Amount (\$)<br>\$385.00                                             | Office sought<br>Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025 |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                   |                                                                                                                                                                                                            |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                |                                                                                                                                                                                                            |
|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 12/55 Rpt: 46/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                          | <b>3</b> Filer ID                                                                                                                                                                                          |
| <b>4</b> Date<br>02/23/2026                                         | <b>5</b> Payee name<br>Facebook                                                                |                                                                                                                                                                                                            |
| <b>6</b> Amount (\$)<br>\$210.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025      |                                                                                                                                                                                                            |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                |                                                                                                                                                                                                            |
| Date<br>02/23/2026                                                  | Candidate/Officeholder name<br>Facebook                                                        | Office sought<br>Office held                                                                                                                                                                               |
| Amount (\$)<br>\$291.00                                             | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025               |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                |                                                                                                                                                                                                            |
| Date<br>02/23/2026                                                  | Candidate/Officeholder name<br>Facebook                                                        | Office sought<br>Office held                                                                                                                                                                               |
| Amount (\$)<br>\$291.00                                             | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025               |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                |                                                                                                                                                                                                            |
| Date<br>02/23/2026                                                  | Candidate/Officeholder name<br>Facebook                                                        | Office sought<br>Office held                                                                                                                                                                               |
| Amount (\$)<br>\$291.00                                             | Payee address; City; State; Zip Code<br>1 Hacker Way<br><br>Menlo Park, CA 94025               |                                                                                                                                                                                                            |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Social media ads        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                |                                                                                                                                                                                                            |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |  |                                                                                                                                                          |  |                                                                                                                                                                                                                                                    |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 11/55 Rpt: 45/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                                                                  |
| <b>4</b> Date<br>04/09/2026                                         |  | <b>5</b> Payee name<br>Democratic Women of Comal County                                                                                                  |  |                                                                                                                                                                                                                                                    |
| <b>6</b> Amount (\$)<br>\$500.00                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>1592 W San Antonio St<br><br>New Braunfels, TX 78130                                                    |  |                                                                                                                                                                                                                                                    |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation                                                 |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name Office sought Office held                                                                                                    |  |                                                                                                                                                                                                                                                    |
| Date<br>03/23/2026                                                  |  | Payee name<br>Enterprise Rental Car                                                                                                                      |  |                                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$498.88                                             |  | Payee address; City; State; Zip Code<br>600 Corporate Park Dr.<br><br>St. Louis, MO 63105                                                                |  |                                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District                                                        |  | <b>(b)</b> Description<br><input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>rental car for Washington DC trip 3/23 - 3/25 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name Office sought Office held                                                                                                    |  |                                                                                                                                                                                                                                                    |
| Date<br>03/02/2026                                                  |  | Payee name<br>Escobedo, Samara                                                                                                                           |  |                                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$480.00                                             |  | Payee address; City; State; Zip Code<br>235 Waugh St.<br><br>San Antonio, TX 78223                                                                       |  |                                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                                                 |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing                                      |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name Office sought Office held                                                                                                    |  |                                                                                                                                                                                                                                                    |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 10/55 Rpt: 44/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>Covarrubias, Aaron                                                                |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$396.75                                    | <b>7</b> Payee address; City; State; Zip Code<br>7200 S. Presa, Apt. 2205<br><br>San Antonio, TX 78223   |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/27/2026                                                  | Payee name<br>Cuellar, Diego                                                                             |                                                                                                                                                                                                               |
| Amount (\$)<br>\$103.50                                             | Payee address; City; State; Zip Code<br>7200 S. Presa St. #2205<br><br>San Antonio, TX 78223             |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>03/04/2026                                                  | Payee name<br>Cuellar, Diego                                                                             |                                                                                                                                                                                                               |
| Amount (\$)<br>\$166.75                                             | Payee address; City; State; Zip Code<br>7200 S. Presa St. #2205<br><br>San Antonio, TX 78223             |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                   |                                                                                                                                                                                                        |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 9/55 Rpt: 43/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                             | <b>3</b> Filer ID                                                                                                                                                                                      |
| <b>4</b> Date<br>02/24/2026                                         | <b>5</b> Payee name<br>Conexion Political LLC                                                     |                                                                                                                                                                                                        |
| <b>6</b> Amount (\$)<br>\$80,231.00                                 | <b>7</b> Payee address; City; State; Zip Code<br>99 M St SE FI 8<br><br>Washington, DC 20003      |                                                                                                                                                                                                        |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>media buy    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                              |
| Date<br>02/25/2026                                                  | Payee name<br>Conexion Political LLC                                                              |                                                                                                                                                                                                        |
| Amount (\$)<br>\$30,000.00                                          | Payee address; City; State; Zip Code<br>99 M St SE FI 8<br><br>Washington, DC 20003               |                                                                                                                                                                                                        |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>media buy           |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                              |
| Date<br>02/27/2026                                                  | Payee name<br>Covarrubias, Aaron                                                                  |                                                                                                                                                                                                        |
| Amount (\$)<br>\$437.00                                             | Payee address; City; State; Zip Code<br>7200 S. Presa, Apt. 2205<br><br>San Antonio, TX 78223     |                                                                                                                                                                                                        |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                              |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                 |                                                                                                                                                                                                                  |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 8/55 Rpt: 42/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                           | <b>3</b> Filer ID                                                                                                                                                                                                |
| <b>4</b> Date<br>02/27/2026                                         | <b>5</b> Payee name<br>Collins, Joshua                                                          |                                                                                                                                                                                                                  |
| <b>6</b> Amount (\$)<br>\$1,000.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>517 E. Locust St.<br><br>San Antonio, TX 78212 |                                                                                                                                                                                                                  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>video content services |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                 |                                                                                                                                                                                                                  |
| Date<br>03/27/2026                                                  | Candidate/Officeholder name<br>Collins, Joshua                                                  |                                                                                                                                                                                                                  |
| Amount (\$)<br>\$3,500.00                                           | Office sought<br>Office held                                                                    |                                                                                                                                                                                                                  |
|                                                                     | Payee address; City; State; Zip Code<br>517 E. Locust St.<br><br>San Antonio, TX 78212          |                                                                                                                                                                                                                  |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>video content services        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                 |                                                                                                                                                                                                                  |
| Date<br>04/01/2026                                                  | Candidate/Officeholder name<br>Collins, Joshua                                                  |                                                                                                                                                                                                                  |
| Amount (\$)<br>\$500.00                                             | Office sought<br>Office held                                                                    |                                                                                                                                                                                                                  |
|                                                                     | Payee address; City; State; Zip Code<br>517 E. Locust St.<br><br>San Antonio, TX 78212          |                                                                                                                                                                                                                  |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>video content services        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                 |                                                                                                                                                                                                                  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                                                                   |                                                                                                                                                                                                                                             |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 7/55 Rpt: 41/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                             | <b>3</b> Filer ID                                                                                                                                                                                                                           |
| <b>4</b> Date<br>03/02/2026                                         | <b>5</b> Payee name<br>CallHub                                                                                                                    |                                                                                                                                                                                                                                             |
| <b>6</b> Amount (\$)<br>\$2,500.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>2093 Philadelphia Pike #7468<br><br>Claymont, DE 19703                                           |                                                                                                                                                                                                                                             |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                                                    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>voter outreach                                    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                                                                   |                                                                                                                                                                                                                                             |
| Date<br>05/12/2026                                                  | Candidate/Officeholder name<br>Chabad Center for Jewish Life & Learning                                                                           |                                                                                                                                                                                                                                             |
| Amount (\$)<br>\$650.00                                             | Office sought<br>Office held                                                                                                                      |                                                                                                                                                                                                                                             |
| Date<br>05/12/2026                                                  | Payee name<br>Chabad Center for Jewish Life & Learning                                                                                            |                                                                                                                                                                                                                                             |
| Amount (\$)<br>\$650.00                                             | Payee address; City; State; Zip Code<br>14535 Blanco Road<br><br>San Antonio, TX 78216                                                            |                                                                                                                                                                                                                                             |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation for ad                                          |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                                                                   |                                                                                                                                                                                                                                             |
| Date<br>06/30/2026                                                  | Candidate/Officeholder name<br>Circle K                                                                                                           |                                                                                                                                                                                                                                             |
| Amount (\$)<br>\$94.48                                              | Office sought<br>Office held                                                                                                                      |                                                                                                                                                                                                                                             |
| Date<br>06/30/2026                                                  | Payee name<br>Circle K                                                                                                                            |                                                                                                                                                                                                                                             |
| Amount (\$)<br>\$94.48                                              | Payee address; City; State; Zip Code<br>11102 IH 37<br><br>Corpus Christi, TX 78410                                                               |                                                                                                                                                                                                                                             |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District                                                        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fuel trip to convention in Corpus Christi 6/26 - 6/28/26 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                                                                   |                                                                                                                                                                                                                                             |
| Date<br>06/30/2026                                                  | Candidate/Officeholder name<br>Circle K                                                                                                           |                                                                                                                                                                                                                                             |
| Amount (\$)<br>\$94.48                                              | Office sought<br>Office held                                                                                                                      |                                                                                                                                                                                                                                             |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                 |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 6/55 Rpt: 40/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                           | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>05/06/2026                                         | <b>5</b> Payee name<br>Bolds, Jacqueline                                                        |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$2,000.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>3922 Southern Sky<br><br>San Antonio, TX 78222 |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>scheduling services |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                 |                                                                                                                                                                                                               |
| Date<br>06/02/2026                                                  | Candidate/Officeholder name<br>Bolds, Jacqueline                                                |                                                                                                                                                                                                               |
| Amount (\$)<br>\$2,000.00                                           | Office sought<br>3922 Southern Sky<br><br>San Antonio, TX 78222                                 |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>scheduling services        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                 |                                                                                                                                                                                                               |
| Date<br>02/23/2026                                                  | Candidate/Officeholder name<br>CallHub                                                          |                                                                                                                                                                                                               |
| Amount (\$)<br>\$2,500.00                                           | Office sought<br>2093 Philadelphia Pike #7468<br><br>Claymont, DE 19703                         |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense         | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>voter outreach             |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                 |                                                                                                                                                                                                               |
| Candidate/Officeholder name<br>Office sought<br>Office held         |                                                                                                 |                                                                                                                                                                                                               |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                   |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 5/55 Rpt: 39/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                             | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/17/2026                                         | <b>5</b> Payee name<br>Bexar County Democrats                                                     |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$250.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>1844 Fredericksburg<br><br>San Antonio, TX 78201 |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Fees                   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>sponsorship fee     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                       | Office sought      Office held                                                                                                                                                                                |
| Date<br>03/19/2026                                                  | Payee name<br>Bolds, Jacqueline                                                                   |                                                                                                                                                                                                               |
| Amount (\$)<br>\$1,000.00                                           | Payee address; City; State; Zip Code<br>3922 Southern Sky<br><br>San Antonio, TX 78222            |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>scheduling services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought      Office held                                                                                                                                                                                |
| Date<br>04/12/2026                                                  | Payee name<br>Bolds, Jacqueline                                                                   |                                                                                                                                                                                                               |
| Amount (\$)<br>\$500.00                                             | Payee address; City; State; Zip Code<br>3922 Southern Sky<br><br>San Antonio, TX 78222            |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense     | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>scheduling services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought      Office held                                                                                                                                                                                |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                                                                   |                                                                                                                                                                                                                   |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 4/55 Rpt: 38/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                             | <b>3</b> Filer ID                                                                                                                                                                                                 |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>Bean, Lakiesha                                                                                                             |                                                                                                                                                                                                                   |
| <b>6</b> Amount (\$)<br>\$241.50                                    | <b>7</b> Payee address; City; State; Zip Code<br>4019 Lena Gardens<br><br>Von Ormy, TX 78073                                                      |                                                                                                                                                                                                                   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                                          | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing     |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                                                                   |                                                                                                                                                                                                                   |
|                                                                     | Candidate/Officeholder name                                                                                                                       | Office sought Office held                                                                                                                                                                                         |
| Date<br>03/06/2026                                                  | Payee name<br>Bean, Lakiesha                                                                                                                      |                                                                                                                                                                                                                   |
| Amount (\$)<br>\$285.00                                             | Payee address; City; State; Zip Code<br>4019 Lena Gardens<br><br>Von Ormy, TX 78073                                                               |                                                                                                                                                                                                                   |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                                                 | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                                                                   |                                                                                                                                                                                                                   |
|                                                                     | Candidate/Officeholder name                                                                                                                       | Office sought Office held                                                                                                                                                                                         |
| Date<br>06/01/2026                                                  | Payee name<br>Bexar County Democrats                                                                                                              |                                                                                                                                                                                                                   |
| Amount (\$)<br>\$5,000.00                                           | Payee address; City; State; Zip Code<br>1844 Fredericksburg<br><br>San Antonio, TX 78201                                                          |                                                                                                                                                                                                                   |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Coordination Campaign donation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                                                                   |                                                                                                                                                                                                                   |
|                                                                     | Candidate/Officeholder name                                                                                                                       | Office sought Office held                                                                                                                                                                                         |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 3/55 Rpt: 37/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/02/2026                                         | <b>5</b> Payee name<br>Basaldua, Mark                                                                    |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$1,760.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>2802 Woodline<br><br>San Antonio, TX 78251              |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>04/01/2026                                                  | Payee name<br>Basaldua, Mark                                                                             |                                                                                                                                                                                                               |
| Amount (\$)<br>\$400.00                                             | Payee address; City; State; Zip Code<br>2802 Woodline<br><br>San Antonio, TX 78251                       |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/27/2026                                                  | Payee name<br>Bean, Lakiesha                                                                             |                                                                                                                                                                                                               |
| Amount (\$)<br>\$569.25                                             | Payee address; City; State; Zip Code<br>4019 Lena Gardens<br><br>Von Ormy, TX 78073                      |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                     |                                                                                                                                                                                                                     |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 2/55 Rpt: 36/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                               | <b>3</b> Filer ID                                                                                                                                                                                                   |
| <b>4</b> Date<br>02/25/2026                                         | <b>5</b> Payee name<br>Avista Products                                                              |                                                                                                                                                                                                                     |
| <b>6</b> Amount (\$)<br>\$450.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>3363 E. Commerce #116<br><br>San Antonio, TX 78220 |                                                                                                                                                                                                                     |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>print ad buy              |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                     |                                                                                                                                                                                                                     |
| Date<br>03/04/2026                                                  | Candidate/Officeholder name<br>Backyard on Broadway                                                 | Office sought<br>Office held                                                                                                                                                                                        |
| Amount (\$)<br>\$1,040.00                                           | Payee address; City; State; Zip Code<br>2411 Broadway<br><br>San Antonio, TX 78215                  |                                                                                                                                                                                                                     |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign fundraiser event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                     |                                                                                                                                                                                                                     |
| Date<br>03/04/2026                                                  | Candidate/Officeholder name<br>Backyard on Broadway                                                 | Office sought<br>Office held                                                                                                                                                                                        |
| Amount (\$)<br>\$1,901.29                                           | Payee address; City; State; Zip Code<br>2411 Broadway<br><br>San Antonio, TX 78215                  |                                                                                                                                                                                                                     |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign fundraiser event |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                     |                                                                                                                                                                                                                     |
| Candidate/Officeholder name<br>Office sought<br>Office held         |                                                                                                     |                                                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                                                                          |                                                                                                                                                                                                    |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 1/55 Rpt: 35/90           | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                                    | <b>3</b> Filer ID                                                                                                                                                                                  |
| <b>4</b> Date<br>02/23/2026                                         | <b>5</b> Payee name<br>Alamo Mailing Company                                                                                                             |                                                                                                                                                                                                    |
| <b>6</b> Amount (\$)<br>\$3,216.41                                  | <b>7</b> Payee address; City; State; Zip Code<br>13114 Lookout Run<br><br>San Antonio, TX 78233                                                          |                                                                                                                                                                                                    |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Printing Expense                                                              | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>mailers  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                                                                          |                                                                                                                                                                                                    |
| Date<br>03/25/2026                                                  | Candidate/Officeholder name<br>Asian American Action Fund                                                                                                |                                                                                                                                                                                                    |
| Amount (\$)<br>\$500.00                                             | Payee address; City; State; Zip Code<br>1909 K Street, NW, 12th Floor<br><br>Washington, DC 20006                                                        |                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                                                                          |                                                                                                                                                                                                    |
| Date<br>06/22/2026                                                  | Candidate/Officeholder name<br>Asian American Action Fund                                                                                                |                                                                                                                                                                                                    |
| Amount (\$)<br>\$100.00                                             | Payee address; City; State; Zip Code<br>1909 K Street, NW, 12th Floor<br><br>Washington, DC 20006                                                        |                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                                                                          |                                                                                                                                                                                                    |
|                                                                     |                                                                                                                                                          |                                                                                                                                                                                                    |

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2:  
Sch: 1/1 Rpt: 34/90

2 FILER NAME  
Nirenberg, Ron

3 Filer ID

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$

5 Date  
06/29/2026

6 Full name of contributor ☐ out-of-state PAC (ID#: \_\_\_\_\_)  
Najim, Harvey

7 Contributor address; City; State; Zip Code  
306 Hunington Place

San Antonio, TX 78231

8 Amount of contribution (\$)  
\$50,000.00

9 In-kind contribution description  
loan forgiveness

☐ Check if travel outside of Texas. Complete Schedule T.

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

11 Employer (FOR NON-JUDICIAL) (See instructions)  
Najim Family Foundation

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)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                                                  |                                                                                                                                                                                                                        |                                                            |
|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                                 |                                                                                                                                                                                                                        | <b>1</b> Total pages Schedule A1:<br>Sch: 30/30 Rpt: 33/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                                            |                                                                                                                                                                                                                        | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>02/27/2026                                                                      | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wolff, Scott<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>211 Waxberry Trl<br><br>San Antonio, TX 78256 | <b>7</b> Amount of Contribution (\$)<br><br>\$300.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Commercial real estate brokerage |                                                                                                                                                                                                                        | <b>9</b> Employer (See Instructions)<br>Wolff Commercial   |
| Date<br>05/19/2026                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Yantis, Blake<br><hr/> Contributor address; City; State; Zip Code<br>111 Fawn Dr<br><br>Shavano Park, TX 78231                      | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed                              |                                                                                                                                                                                                                        | Employer (See Instructions)<br>Not Employed                |
| Date<br>05/19/2026                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Yantis, Blake<br><hr/> Contributor address; City; State; Zip Code<br>111 Fawn Dr<br><br>Shavano Park, TX 78231                      | Amount of Contribution (\$)<br><br>\$2,000.00              |
| Principal occupation / Job title (See Instructions)<br>Not Employed                              |                                                                                                                                                                                                                        | Employer (See Instructions)<br>Not Employed                |
| Date<br>03/31/2026                                                                               | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Zachry, David<br><hr/> Contributor address; City; State; Zip Code<br>4242 Broadway Apt 2101<br><br>San Antonio, TX 78209            | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)<br>Chairman of the Board                     |                                                                                                                                                                                                                        | Employer (See Instructions)<br>Zachry Corporation          |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                            |                                                                                                                                                                                                                                  |                                                                    |
|----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>           |                                                                                                                                                                                                                                  | <b>1</b> Total pages Schedule A1:<br>Sch: 29/30 Rpt: 32/90         |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                      |                                                                                                                                                                                                                                  | <b>3</b> Filer ID                                                  |
| <b>4</b> Date<br>04/07/2026                                                | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Vasquez III, Silvestre<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>16006 Ponderosa Pass<br><br>Helotes, TX 78023 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00             |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Consultant |                                                                                                                                                                                                                                  | <b>9</b> Employer (See Instructions)<br>Quatro Strategic Solutions |
| Date<br>05/19/2026                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Verma, Neilesh<br><hr/> Contributor address; City; State; Zip Code<br>1307 Fern Shadow Cv<br><br>San Antonio, TX 78258                        | Amount of Contribution (\$)<br><br>\$500.00                        |
| Principal occupation / Job title (See Instructions)<br>Executive           |                                                                                                                                                                                                                                  | Employer (See Instructions)<br>Galaxy Builders, Ltd.               |
| Date<br>05/19/2026                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Vexler, Jordan<br><hr/> Contributor address; City; State; Zip Code<br>305 W Kings Hwy<br><br>San Antonio, TX 78212                            | Amount of Contribution (\$)<br><br>\$2,000.00                      |
| Principal occupation / Job title (See Instructions)<br>Recycling           |                                                                                                                                                                                                                                  | Employer (See Instructions)<br>Monterrey Iron                      |
| Date<br>03/04/2026                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Willbanks, Lisa<br><hr/> Contributor address; City; State; Zip Code<br>4647 Amorosa Way<br><br>San Antonio, TX 78261                          | Amount of Contribution (\$)<br><br>\$50.00                         |
| Principal occupation / Job title (See Instructions)<br>Not Employed        |                                                                                                                                                                                                                                  | Employer (See Instructions)<br>Not Employed                        |
| Date<br>05/06/2026                                                         | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Wilson, Floyd<br><hr/> Contributor address; City; State; Zip Code<br>18011 Bullis HI<br><br>San Antonio, TX 78258                             | Amount of Contribution (\$)<br><br>\$500.00                        |
| Principal occupation / Job title (See Instructions)<br>retired             |                                                                                                                                                                                                                                  | Employer (See Instructions)<br>N/A                                 |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                                        |                                                                                                                                                                                                                                                                     |                                                               |
|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                       |                                                                                                                                                                                                                                                                     | <b>1</b> Total pages Schedule A1:<br>Sch: 28/30 Rpt: 31/90    |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                                  |                                                                                                                                                                                                                                                                     | <b>3</b> Filer ID                                             |
| <b>4</b> Date<br>03/04/2026                                                            | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Taylor, Anthony<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>10510 Waverunner<br><br>Converse, TX 78109                                              | <b>7</b> Amount of Contribution (\$)<br><br>\$25.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Information technology |                                                                                                                                                                                                                                                                     | <b>9</b> Employer (See Instructions)<br>Index analytics       |
| Date<br>03/05/2026                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Toubin, Jimmy<br><hr/> Contributor address; City; State; Zip Code<br>230 W Sunset Rd Apt 1007<br><br>San Antonio, TX 78209                                                       | Amount of Contribution (\$)<br><br>\$250.00                   |
| Principal occupation / Job title (See Instructions)<br>Sles Professional               |                                                                                                                                                                                                                                                                     | Employer (See Instructions)<br>AXrisure                       |
| Date<br>05/08/2026                                                                     | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00010470)<br>Union Pacific Corporation Fund for Effective Government<br><hr/> Contributor address; City; State; Zip Code<br>700 13th St NW Ste 350<br><br>Washington, DC 20005 | Amount of Contribution (\$)<br><br>\$1,000.00                 |
| Principal occupation / Job title (See Instructions)                                    |                                                                                                                                                                                                                                                                     | Employer (See Instructions)                                   |
| Date<br>05/18/2026                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Vasquez, Rudy<br><hr/> Contributor address; City; State; Zip Code<br>7975 Cibolo Vw<br><br>Boerne, TX 78015                                                                      | Amount of Contribution (\$)<br><br>\$100.00                   |
| Principal occupation / Job title (See Instructions)<br>Attorney                        |                                                                                                                                                                                                                                                                     | Employer (See Instructions)<br>law Offices of Rudy Vasquez pc |
| Date<br>05/20/2026                                                                     | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Vasquez, Rudy<br><hr/> Contributor address; City; State; Zip Code<br>7975 Cibolo Vw<br><br>Boerne, TX 78015                                                                      | Amount of Contribution (\$)<br><br>\$75.00                    |
| Principal occupation / Job title (See Instructions)<br>Attorney                        |                                                                                                                                                                                                                                                                     | Employer (See Instructions)<br>law Offices of Rudy Vasquez pc |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|                                                                          |                                                                                                                                                                                                                                |                                                            |
|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>         |                                                                                                                                                                                                                                | <b>1</b> Total pages Schedule A1:<br>Sch: 27/30 Rpt: 30/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                    |                                                                                                                                                                                                                                | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>03/29/2026                                              | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Smith, Andre<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>1035 W Van Buren St Apt 2404<br><br>Chicago, IL 60607 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Attorney |                                                                                                                                                                                                                                | <b>9</b> Employer (See Instructions)<br>Fannie Mae         |
| Date<br>06/03/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Starr, Matthew<br><hr/> Contributor address; City; State; Zip Code<br>7334 Blanco Rd Ste 200<br><br>San Antonio, TX 78216                   | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Real estate       |                                                                                                                                                                                                                                | Employer (See Instructions)<br>Self                        |
| Date<br>03/04/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Stephenson, Tom<br><hr/> Contributor address; City; State; Zip Code<br>14 Oak Hill Pl<br><br>San Antonio, TX 78229                          | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Not Employed      |                                                                                                                                                                                                                                | Employer (See Instructions)<br>Not Employed                |
| Date<br>04/20/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Suescun-Fast, Anamaria<br><hr/> Contributor address; City; State; Zip Code<br>360 Pike Rd<br><br>San Antonio, TX 78209                      | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Marketing         |                                                                                                                                                                                                                                | Employer (See Instructions)<br>talkStrategy                |
| Date<br>02/27/2026                                                       | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sutherland, William<br><hr/> Contributor address; City; State; Zip Code<br>116 Canterbury Hill St<br><br>San Antonio, TX 78209              | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)<br>Attorney          |                                                                                                                                                                                                                                | Employer (See Instructions)<br>Kennedy Sutherland LLP      |



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|                                                                              |                                                                                                                                                                                                                                     |                                                            |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>             |                                                                                                                                                                                                                                     | <b>1</b> Total pages Schedule A1:<br>Sch: 26/30 Rpt: 29/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                        |                                                                                                                                                                                                                                     | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>04/22/2026                                                  | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sergeant, Jared<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>2617 Roosevelt Ave Trlr 77<br><br>San Antonio, TX 78214 | <b>7</b> Amount of Contribution (\$)<br><br>\$10.00        |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Not Employed |                                                                                                                                                                                                                                     | <b>9</b> Employer (See Instructions)<br>Not Employed       |
| Date<br>03/22/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sergeant, Jared<br><hr/> Contributor address; City; State; Zip Code<br>2617 Roosevelt Ave Trlr 77<br><br>San Antonio, TX 78214                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |                                                                                                                                                                                                                                     | Employer (See Instructions)<br>Not Employed                |
| Date<br>05/22/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sergeant, Jared<br><hr/> Contributor address; City; State; Zip Code<br>2617 Roosevelt Ave Trlr 77<br><br>San Antonio, TX 78214                   | Amount of Contribution (\$)<br><br>\$10.00                 |
| Principal occupation / Job title (See Instructions)<br>Not Employed          |                                                                                                                                                                                                                                     | Employer (See Instructions)<br>Not Employed                |
| Date<br>04/13/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Serna, Jr., Baltazar<br><hr/> Contributor address; City; State; Zip Code<br>237 W Travis St<br><br>San Antonio, TX 78205                         | Amount of Contribution (\$)<br><br>\$2,000.00              |
| Principal occupation / Job title (See Instructions)<br>Partner               |                                                                                                                                                                                                                                     | Employer (See Instructions)<br>Serna & Serna               |
| Date<br>02/24/2026                                                           | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Shields, John Joseph<br><hr/> Contributor address; City; State; Zip Code<br>325 Wildrose Ave<br><br>San Antonio, TX 78209                        | Amount of Contribution (\$)<br><br>\$5,000.00              |
| Principal occupation / Job title (See Instructions)<br>Executive VP          |                                                                                                                                                                                                                                     | Employer (See Instructions)<br>McCombs Enterprises         |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                   |                                                                                                                                                                                                                                                | <b>1</b> Total pages Schedule A1:<br>Sch: 25/30 Rpt: 28/90  |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                              |                                                                                                                                                                                                                                                | <b>3</b> Filer ID                                           |
| <b>4</b> Date<br>06/05/2026                                                        | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>San Antonio Apartment Association PAC<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>7525 Babcock Rd<br><br>San Antonio, TX 78249 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00      |
| <b>8</b> Principal occupation / Job title (See Instructions)                       |                                                                                                                                                                                                                                                | <b>9</b> Employer (See Instructions)                        |
| Date<br>05/27/2026                                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>San Antonio Apartment Association PAC<br><hr/> Contributor address; City; State; Zip Code<br>7525 Babcock Rd<br><br>San Antonio, TX 78249                   | Amount of Contribution (\$)<br><br>\$2,500.00               |
| Principal occupation / Job title (See Instructions)                                |                                                                                                                                                                                                                                                | Employer (See Instructions)                                 |
| Date<br>04/20/2026                                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sanchez, Juan<br><hr/> Contributor address; City; State; Zip Code<br>8455 Sierra Hermosa<br><br>San Antonio, TX 78255                                       | Amount of Contribution (\$)<br><br>\$500.00                 |
| Principal occupation / Job title (See Instructions)<br>CPA                         |                                                                                                                                                                                                                                                | Employer (See Instructions)<br>Sanchez-Salazar & Associates |
| Date<br>04/20/2026                                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sandrana, Shiva<br><hr/> Contributor address; City; State; Zip Code<br>2802 Hunters Star St<br><br>San Antonio, TX 78230                                    | Amount of Contribution (\$)<br><br>\$1,000.00               |
| Principal occupation / Job title (See Instructions)<br>Principal & Project Manager |                                                                                                                                                                                                                                                | Employer (See Instructions)<br>Floodace, LLC                |
| Date<br>02/22/2026                                                                 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sergeant, Jared<br><hr/> Contributor address; City; State; Zip Code<br>2617 Roosevelt Ave Trlr 77<br><br>San Antonio, TX 78214                              | Amount of Contribution (\$)<br><br>\$10.00                  |
| Principal occupation / Job title (See Instructions)<br>Not Employed                |                                                                                                                                                                                                                                                | Employer (See Instructions)<br>Not Employed                 |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| The Instruction Guide explains how to complete this form.                         |                                                                                                        | 1 Total pages Schedule A1:<br>Sch: 24/30 Rpt: 27/90           |
| 2 FILER NAME<br>Nirenberg, Ron                                                    |                                                                                                        | 3 Filer ID                                                    |
| 4 Date<br>05/26/2026                                                              | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rotnofsky, Julian | 7 Amount of Contribution (\$)<br><br>\$500.00                 |
|                                                                                   | 6 Contributor address; City; State; Zip Code<br>7707 Broadway Apt 17A<br><br>San Antonio, TX 78209     |                                                               |
| 8 Principal occupation / Job title (See Instructions)<br>Real estate              |                                                                                                        | 9 Employer (See Instructions)<br>Las plazas of laredo inc     |
| Date<br>02/27/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rust, Michael       | Amount of Contribution (\$)<br><br>\$500.00                   |
|                                                                                   | Contributor address; City; State; Zip Code<br>1155 Cherry Hill<br><br>New Braunfels, TX 78130          |                                                               |
| Principal occupation / Job title (See Instructions)<br>General Operations Manager |                                                                                                        | Employer (See Instructions)<br>Highland Commercial Properties |
| Date<br>04/20/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>STV Group, Inc. PAC | Amount of Contribution (\$)<br><br>\$1,000.00                 |
|                                                                                   | Contributor address; City; State; Zip Code<br>205 W Welsh Dr<br><br>Douglassville, PA 19518            |                                                               |
| Principal occupation / Job title (See Instructions)                               |                                                                                                        | Employer (See Instructions)                                   |
| Date<br>04/13/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Sabinal Group       | Amount of Contribution (\$)<br><br>\$2,500.00                 |
|                                                                                   | Contributor address; City; State; Zip Code<br>237 W Travis St Ste 200<br><br>San Antonio, TX 78205     |                                                               |
| Principal occupation / Job title (See Instructions)                               |                                                                                                        | Employer (See Instructions)                                   |
| Date<br>04/20/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Salazar, Fernando   | Amount of Contribution (\$)<br><br>\$500.00                   |
|                                                                                   | Contributor address; City; State; Zip Code<br>3718 Owl Crk<br><br>San Antonio, TX 78257                |                                                               |
| Principal occupation / Job title (See Instructions)<br>Vice President             |                                                                                                        | Employer (See Instructions)<br>Sanchez-Salazar & Assoc.       |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|-------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                    |                                                                                                                                                                                                                          | <b>1</b> Total pages Schedule A1:<br>Sch: 23/30 Rpt: 26/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                               |                                                                                                                                                                                                                          | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>04/13/2026                                                         | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rodriguez, Justin<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>PO Box 100153<br><br>San Antonio, TX 78201 | <b>7</b> Amount of Contribution (\$)<br><br>\$2,500.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>County Commissioner |                                                                                                                                                                                                                          | <b>9</b> Employer (See Instructions)<br>Bexar County       |
| Date<br>04/06/2026                                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rodriguez, Marc A<br><hr/> Contributor address; City; State; Zip Code<br>1122 Colorado St Ste 2399<br><br>Austin, TX 78701            | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)<br>Lobbyist                     |                                                                                                                                                                                                                          | Employer (See Instructions)<br>Self Employed               |
| Date<br>03/04/2026                                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rosenberg, Lee<br><hr/> Contributor address; City; State; Zip Code<br>46 Westelm Cir<br><br>San Antonio, TX 78230                     | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Business Executives          |                                                                                                                                                                                                                          | Employer (See Instructions)<br>ROSENBERG PLUMBING AND AIR  |
| Date<br>02/27/2026                                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Ross, Alan<br><hr/> Contributor address; City; State; Zip Code<br>7990 Valley Crst<br><br>Fair Oaks Ranch, TX 78015                   | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)<br>Director of Operations       |                                                                                                                                                                                                                          | Employer (See Instructions)<br>SAAA                        |
| Date<br>03/03/2026                                                                  | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rossiter, Daniel<br><hr/> Contributor address; City; State; Zip Code<br>4606 Lone Eagle St Unit 102<br><br>San Antonio, TX 78238      | Amount of Contribution (\$)<br><br>\$250.00                |
| Principal occupation / Job title (See Instructions)<br>Real estate                  |                                                                                                                                                                                                                          | Employer (See Instructions)<br>Rossiter Realty             |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

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|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                  |                                                                                                                                                                                                                                            | <b>1</b> Total pages Schedule A1:<br>Sch: 22/30 Rpt: 25/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                             |                                                                                                                                                                                                                                            | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>04/16/2026                                                       | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rangel-Ortiz, Luis<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>8123 N New Braunfels Ave Apt C<br><br>San Antonio, TX 78209 | <b>7</b> Amount of Contribution (\$)<br><br>\$100.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>College Professor |                                                                                                                                                                                                                                            | <b>9</b> Employer (See Instructions)<br>Alamo Colleges     |
| Date<br>03/16/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rangel-Ortiz, Luis<br><hr/> Contributor address; City; State; Zip Code<br>8123 N New Braunfels Ave Apt C<br><br>San Antonio, TX 78209                   | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>College Professor          |                                                                                                                                                                                                                                            | Employer (See Instructions)<br>Alamo Colleges              |
| Date<br>06/16/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rangel-Ortiz, Luis<br><hr/> Contributor address; City; State; Zip Code<br>8123 N New Braunfels Ave Apt C<br><br>San Antonio, TX 78209                   | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>College Professor          |                                                                                                                                                                                                                                            | Employer (See Instructions)<br>Alamo Colleges              |
| Date<br>05/16/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Rangel-Ortiz, Luis<br><hr/> Contributor address; City; State; Zip Code<br>8123 N New Braunfels Ave Apt C<br><br>San Antonio, TX 78209                   | Amount of Contribution (\$)<br><br>\$100.00                |
| Principal occupation / Job title (See Instructions)<br>College Professor          |                                                                                                                                                                                                                                            | Employer (See Instructions)<br>Alamo Colleges              |
| Date<br>02/25/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Reyes, Allison<br><hr/> Contributor address; City; State; Zip Code<br>519 Brightwood Pl<br><br>San Antonio, TX 78209                                    | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Self Employed              |                                                                                                                                                                                                                                            | Employer (See Instructions)<br>Self Employed               |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|                                                                       |                                                                                                                                                                                                                                   |                                                            |
|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>      |                                                                                                                                                                                                                                   | <b>1</b> Total pages Schedule A1:<br>Sch: 21/30 Rpt: 24/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                 |                                                                                                                                                                                                                                   | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>05/26/2026                                           | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pierce, Tomeka<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>318 W Grayson St Unit 202<br><br>San Antonio, TX 78212 | <b>7</b> Amount of Contribution (\$)<br><br>\$200.00       |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Owner |                                                                                                                                                                                                                                   | <b>9</b> Employer (See Instructions)<br>Level 1 AG LLC     |
| Date<br>05/26/2026                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Podojil, Ronald<br><hr/> Contributor address; City; State; Zip Code<br>10118 Iron Oak Ln<br><br>San Antonio, TX 78213                          | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Not Employed   |                                                                                                                                                                                                                                   | Employer (See Instructions)<br>Not Employed                |
| Date<br>04/13/2026                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>R.R.P. Consulting Engineers, LLC<br><hr/> Contributor address; City; State; Zip Code<br>104 E Lark Ave<br><br>McAllen, TX 78504                | Amount of Contribution (\$)<br><br>\$5,000.00              |
| Principal occupation / Job title (See Instructions)                   |                                                                                                                                                                                                                                   | Employer (See Instructions)                                |
| Date<br>04/13/2026                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Raba-Kistner PAC<br><hr/> Contributor address; City; State; Zip Code<br>PO Box 690287<br><br>San Antonio, TX 78269                             | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)                   |                                                                                                                                                                                                                                   | Employer (See Instructions)                                |
| Date<br>04/15/2026                                                    | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Raba-Kistner PAC<br><hr/> Contributor address; City; State; Zip Code<br>PO Box 690287<br><br>San Antonio, TX 78269                             | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)                   |                                                                                                                                                                                                                                   | Employer (See Instructions)                                |

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

|                                                                           |                                                                                                                                                                                                                            |                                                            |
|---------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>          |                                                                                                                                                                                                                            | <b>1</b> Total pages Schedule A1:<br>Sch: 20/30 Rpt: 23/90 |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                     |                                                                                                                                                                                                                            | <b>3</b> Filer ID                                          |
| <b>4</b> Date<br>02/27/2026                                               | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pena, Mario<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>7707 Broadway Apt 17A<br><br>San Antonio, TX 78209 | <b>7</b> Amount of Contribution (\$)<br><br>\$1,000.00     |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Architect |                                                                                                                                                                                                                            | <b>9</b> Employer (See Instructions)<br>Able City          |
| Date<br>05/26/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pena, Mario<br><hr/> Contributor address; City; State; Zip Code<br>7707 Broadway Apt 17A<br><br>San Antonio, TX 78209                   | Amount of Contribution (\$)<br><br>\$2,600.00              |
| Principal occupation / Job title (See Instructions)<br>Architect          |                                                                                                                                                                                                                            | Employer (See Instructions)<br>Able City                   |
| Date<br>02/26/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Piatt, Bret<br><hr/> Contributor address; City; State; Zip Code<br>3627 Boulder Peak St<br><br>San Antonio, TX 78247                    | Amount of Contribution (\$)<br><br>\$2,500.00              |
| Principal occupation / Job title (See Instructions)<br>Entrepreneur       |                                                                                                                                                                                                                            | Employer (See Instructions)<br>Piatt & Company             |
| Date<br>03/02/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Picasso, Lasaro<br><hr/> Contributor address; City; State; Zip Code<br>5202 Roan Fld<br><br>San Antonio, TX 78251                       | Amount of Contribution (\$)<br><br>\$1,000.00              |
| Principal occupation / Job title (See Instructions)<br>Self Employed      |                                                                                                                                                                                                                            | Employer (See Instructions)<br>N/A                         |
| Date<br>05/22/2026                                                        | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pierce, Tomeka<br><hr/> Contributor address; City; State; Zip Code<br>318 W Grayson St Unit 202<br><br>San Antonio, TX 78212            | Amount of Contribution (\$)<br><br>\$500.00                |
| Principal occupation / Job title (See Instructions)<br>Owner              |                                                                                                                                                                                                                            | Employer (See Instructions)<br>Level 1 AG LLC              |

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

|                                                                                   |                                                                                                                                                                                                                                      |                                                                |
|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|
| <b>The Instruction Guide explains how to complete this form.</b>                  |                                                                                                                                                                                                                                      | <b>1</b> Total pages Schedule A1:<br>Sch: 19/30 Rpt: 22/90     |
| <b>2</b> FILER NAME<br>Nirenberg, Ron                                             |                                                                                                                                                                                                                                      | <b>3</b> Filer ID                                              |
| <b>4</b> Date<br>02/27/2026                                                       | <b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Patrick, Madeline Quintana<br><hr/> <b>6</b> Contributor address; City; State; Zip Code<br>7525 Babcock Rd.<br><br>San Antonio, TX 78249 | <b>7</b> Amount of Contribution (\$)<br><br>\$500.00           |
| <b>8</b> Principal occupation / Job title (See Instructions)<br>Regional Director |                                                                                                                                                                                                                                      | <b>9</b> Employer (See Instructions)<br>SAAA                   |
| Date<br>03/16/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pena, Ezequiel<br><hr/> Contributor address; City; State; Zip Code<br>721 E Myrtle St<br><br>San Antonio, TX 78212                                | Amount of Contribution (\$)<br><br>\$10.00                     |
| Principal occupation / Job title (See Instructions)<br>Professor                  |                                                                                                                                                                                                                                      | Employer (See Instructions)<br>Our Lady of the Lake University |
| Date<br>04/16/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pena, Ezequiel<br><hr/> Contributor address; City; State; Zip Code<br>721 E Myrtle St<br><br>San Antonio, TX 78212                                | Amount of Contribution (\$)<br><br>\$10.00                     |
| Principal occupation / Job title (See Instructions)<br>Professor                  |                                                                                                                                                                                                                                      | Employer (See Instructions)<br>Our Lady of the Lake University |
| Date<br>05/16/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pena, Ezequiel<br><hr/> Contributor address; City; State; Zip Code<br>721 E Myrtle St<br><br>San Antonio, TX 78212                                | Amount of Contribution (\$)<br><br>\$10.00                     |
| Principal occupation / Job title (See Instructions)<br>Professor                  |                                                                                                                                                                                                                                      | Employer (See Instructions)<br>Our Lady of the Lake University |
| Date<br>06/16/2026                                                                | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)<br>Pena, Ezequiel<br><hr/> Contributor address; City; State; Zip Code<br>721 E Myrtle St<br><br>San Antonio, TX 78212                                | Amount of Contribution (\$)<br><br>\$10.00                     |
| Principal occupation / Job title (See Instructions)<br>Professor                  |                                                                                                                                                                                                                                      | Employer (See Instructions)<br>Our Lady of the Lake University |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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:<br>Sch: 20/55 Rpt: 54/90          |                                                                                                    | 2 FILER NAME<br>Nirenberg, Ron                                                            |                                                                                                                                                                                                            | 3 Filer ID |
| 4 Date<br>03/18/2026                                         |                                                                                                    | 5 Payee name<br>Greater Love Missionary Baptist Church                                    |                                                                                                                                                                                                            |            |
| 6 Amount (\$)<br>\$300.00                                    |                                                                                                    | 7 Payee address; City; State; Zip Code<br>1534 Peck Ave.<br><br>San Antonio, TX 78210     |                                                                                                                                                                                                            |            |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense            |                                                                                           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>print ad                |            |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                    |                                                                                           |                                                                                                                                                                                                            |            |
| Candidate/Officeholder name Office sought Office held        |                                                                                                    |                                                                                           |                                                                                                                                                                                                            |            |
| Date<br>02/23/2026                                           |                                                                                                    | Payee name<br>H-E-B                                                                       |                                                                                                                                                                                                            |            |
| Amount (\$)<br>\$11.18                                       |                                                                                                    | Payee address; City; State; Zip Code<br>415 N. New Braunfels<br><br>San Antonio, TX 78204 |                                                                                                                                                                                                            |            |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |                                                                                           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff supplies |            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |                                                                                                    |                                                                                           |                                                                                                                                                                                                            |            |
| Candidate/Officeholder name Office sought Office held        |                                                                                                    |                                                                                           |                                                                                                                                                                                                            |            |
| Date<br>02/23/2026                                           |                                                                                                    | Payee name<br>H-E-B                                                                       |                                                                                                                                                                                                            |            |
| Amount (\$)<br>\$115.94                                      |                                                                                                    | Payee address; City; State; Zip Code<br>415 N. New Braunfels<br><br>San Antonio, TX 78204 |                                                                                                                                                                                                            |            |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense |                                                                                           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff supplies |            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |                                                                                                    |                                                                                           |                                                                                                                                                                                                            |            |
| Candidate/Officeholder name Office sought Office held        |                                                                                                    |                                                                                           |                                                                                                                                                                                                            |            |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

|                                                                     |                                                                                                                                                          |                                                                                                                                                                                                                           |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 21/55 Rpt: 55/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                                    | <b>3</b> Filer ID                                                                                                                                                                                                         |
| <b>4</b> Date<br>02/24/2026                                         | <b>5</b> Payee name<br>Herospace Digital Consulting LLC                                                                                                  |                                                                                                                                                                                                                           |
| <b>6</b> Amount (\$)<br>\$11,306.88                                 | <b>7</b> Payee address; City; State; Zip Code<br>1840 Mulberry Ave<br><br>San Antonio, TX 78201                                                          |                                                                                                                                                                                                                           |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense                                                           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>website services                |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                 |
| Date<br>03/03/2026                                                  | Payee name<br>Home Depot                                                                                                                                 |                                                                                                                                                                                                                           |
| Amount (\$)<br>\$54.21                                              | Payee address; City; State; Zip Code<br>435 W. Sunset Rd.<br><br>San Antonio, TX 78209                                                                   |                                                                                                                                                                                                                           |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Office Overhead/Rental Expense                                                | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>supplies for signs              |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                 |
| Date<br>03/30/2026                                                  | Payee name<br>Honoring Her                                                                                                                               |                                                                                                                                                                                                                           |
| Amount (\$)<br>\$441.60                                             | Payee address; City; State; Zip Code<br>1811 S. Laredo St.<br><br>San Antonio, TX 78207                                                                  |                                                                                                                                                                                                                           |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>accounting program subscription |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                 |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                    |                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 22/55 Rpt: 56/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                              | <b>3</b> Filer ID                                                                                                                                                                                                               |
| <b>4</b> Date<br>03/05/2026                                         | <b>5</b> Payee name<br>Hudson, Beth                                                                |                                                                                                                                                                                                                                 |
| <b>6</b> Amount (\$)<br>\$1,500.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>111 Forrest Trail<br><br>Universal City, TX 78148 |                                                                                                                                                                                                                                 |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance reporting/compliance services |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                        | Office sought Office held                                                                                                                                                                                                       |
| Date<br>04/07/2026                                                  | Payee name<br>Hudson, Beth                                                                         |                                                                                                                                                                                                                                 |
| Amount (\$)<br>\$1,500.00                                           | Payee address; City; State; Zip Code<br>111 Forrest Trail<br><br>Universal City, TX 78148          |                                                                                                                                                                                                                                 |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance reporting/compliance services        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                        | Office sought Office held                                                                                                                                                                                                       |
| Date<br>05/06/2026                                                  | Payee name<br>Hudson, Beth                                                                         |                                                                                                                                                                                                                                 |
| Amount (\$)<br>\$1,500.00                                           | Payee address; City; State; Zip Code<br>111 Forrest Trail<br><br>Universal City, TX 78148          |                                                                                                                                                                                                                                 |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance reporting/compliance services        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                        | Office sought Office held                                                                                                                                                                                                       |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                                                 |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 23/55 Rpt: 57/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                                               |
| <b>4</b> Date<br>06/08/2026                                         | <b>5</b> Payee name<br>Hudson, Beth                                                                      |                                                                                                                                                                                                                                 |
| <b>6</b> Amount (\$)<br>\$1,500.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>111 Forrest Trail<br><br>Universal City, TX 78148       |                                                                                                                                                                                                                                 |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking            | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Finance reporting/compliance services |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                                       |
| Date<br>02/27/2026                                                  | Payee name<br>Hurst, Kimberly                                                                            |                                                                                                                                                                                                                                 |
| Amount (\$)<br>\$385.25                                             | Payee address; City; State; Zip Code<br>8527 Parthenon Pl.<br><br>Universal City, TX 78148               |                                                                                                                                                                                                                                 |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing                   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                                       |
| Date<br>03/04/2026                                                  | Payee name<br>Hurst, Kimberly                                                                            |                                                                                                                                                                                                                                 |
| Amount (\$)<br>\$287.50                                             | Payee address; City; State; Zip Code<br>8527 Parthenon Pl.<br><br>Universal City, TX 78148               |                                                                                                                                                                                                                                 |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing                   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                                       |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |  |                                                                                                 |  |                                                                                                                                                                                                                           |  |
|---------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 24/55 Rpt: 58/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                           |  | <b>3</b> Filer ID                                                                                                                                                                                                         |  |
| <b>4</b> Date<br>02/23/2026                                         |  | <b>5</b> Payee name<br>Intuit                                                                   |  |                                                                                                                                                                                                                           |  |
| <b>6</b> Amount (\$)<br>\$122.59                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>2632 Marine Way<br><br>Mountain View, CA 94043 |  |                                                                                                                                                                                                                           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>accounting program subscription |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                     |  | Office sought                                                                                                                                                                                                             |  |
| Date<br>03/23/2026                                                  |  | Payee name<br>Intuit                                                                            |  |                                                                                                                                                                                                                           |  |
| Amount (\$)<br>\$79.95                                              |  | Payee address; City; State; Zip Code<br>2632 Marine Way<br><br>Mountain View, CA 94043          |  |                                                                                                                                                                                                                           |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking          |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>accounting program subscription        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                     |  | Office sought                                                                                                                                                                                                             |  |
| Date<br>04/22/2026                                                  |  | Payee name<br>Intuit                                                                            |  |                                                                                                                                                                                                                           |  |
| Amount (\$)<br>\$79.95                                              |  | Payee address; City; State; Zip Code<br>2632 Marine Way<br><br>Mountain View, CA 94043          |  |                                                                                                                                                                                                                           |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking          |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>accounting program subscription        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                     |  | Office sought                                                                                                                                                                                                             |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

|                                                                     |  |                                                                                                 |  |                                                                                                                                                                                                                           |  |
|---------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 25/55 Rpt: 59/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                           |  | <b>3</b> Filer ID                                                                                                                                                                                                         |  |
| <b>4</b> Date<br>05/22/2026                                         |  | <b>5</b> Payee name<br>Intuit                                                                   |  |                                                                                                                                                                                                                           |  |
| <b>6</b> Amount (\$)<br>\$79.95                                     |  | <b>7</b> Payee address; City; State; Zip Code<br>2632 Marine Way<br><br>Mountain View, CA 94043 |  |                                                                                                                                                                                                                           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Accounting/Banking   |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>accounting program subscription |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                     |  | Office sought                                                                                                                                                                                                             |  |
| Date<br>06/22/2026                                                  |  | Payee name<br>Intuit                                                                            |  |                                                                                                                                                                                                                           |  |
| Amount (\$)<br>\$79.95                                              |  | Payee address; City; State; Zip Code<br>2632 Marine Way<br><br>Mountain View, CA 94043          |  |                                                                                                                                                                                                                           |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Accounting/Banking          |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>accounting program subscription        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                     |  | Office sought                                                                                                                                                                                                             |  |
| Date<br>03/11/2026                                                  |  | Payee name<br>JVC Media, LLC                                                                    |  |                                                                                                                                                                                                                           |  |
| Amount (\$)<br>\$4,600.63                                           |  | Payee address; City; State; Zip Code<br>6856 Alamo Downs Pkwy<br><br>San Antonio, TX 78247      |  |                                                                                                                                                                                                                           |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Advertising Expense         |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign signs                         |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                     |  | Office sought                                                                                                                                                                                                             |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                                |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 26/55 Rpt: 60/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                              |
| <b>4</b> Date<br>03/02/2026                                         | <b>5</b> Payee name<br>Jimenez, Susan                                                                    |                                                                                                                                                                                                                |
| <b>6</b> Amount (\$)<br>\$190.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>8619 Elk Runner St.<br><br>San Antonio, TX 78242        |                                                                                                                                                                                                                |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                      |
| Date<br>03/07/2026                                                  | Payee name<br>Jonathan Alonzo Photography                                                                |                                                                                                                                                                                                                |
| Amount (\$)<br>\$1,515.50                                           | Payee address; City; State; Zip Code<br>518 Cherry Ridge Ave.<br><br>San Antonio, TX 78213               |                                                                                                                                                                                                                |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>photography services |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                      |
| Date<br>02/27/2026                                                  | Payee name<br>Jones, Cameron                                                                             |                                                                                                                                                                                                                |
| Amount (\$)<br>\$500.25                                             | Payee address; City; State; Zip Code<br>930 CHEVREUIL ST<br><br>MANDEVILLE, LA 70448                     |                                                                                                                                                                                                                |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                      |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

|                                                                     |  |                                                                                                          |  |                                                                                                                                                                                                               |  |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 27/55 Rpt: 61/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                             |  |
| <b>4</b> Date<br>03/04/2026                                         |  | <b>5</b> Payee name<br>Jones, Cameron                                                                    |  |                                                                                                                                                                                                               |  |
| <b>6</b> Amount (\$)<br>\$195.50                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>930 CHEVREUIL ST<br><br>MANDEVILLE, LA 70448            |  |                                                                                                                                                                                                               |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                 |  |
| Date<br>02/22/2026                                                  |  | Payee name<br>LGM Job For You                                                                            |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$2,000.00                                           |  | Payee address; City; State; Zip Code<br>3666 Versailles Dr.<br><br>San Antonio, TX 78219                 |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Polling Expense               |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Polling services    |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                 |  |
| Date<br>02/23/2026                                                  |  | Payee name<br>LGM Job For You                                                                            |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$1,824.00                                           |  | Payee address; City; State; Zip Code<br>3666 Versailles Dr.<br><br>San Antonio, TX 78219                 |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Polling Expense               |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Polling services    |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                 |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 28/55 Rpt: 62/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>02/27/2026                                         | <b>5</b> Payee name<br>LGM Job For You                                                                   |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$2,000.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>3666 Versailles Dr.<br><br>San Antonio, TX 78219        |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Polling Expense               | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Polling services    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                          |                                                                                                                                                                                                               |
| Date<br>03/02/2026                                                  | Candidate/Officeholder name<br>Office sought<br>Office held                                              |                                                                                                                                                                                                               |
| Payee name<br>LGM Job For You                                       |                                                                                                          |                                                                                                                                                                                                               |
| Amount (\$)<br>\$706.00                                             | Payee address; City; State; Zip Code<br>3666 Versailles Dr.<br><br>San Antonio, TX 78219                 |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                               |
| Date<br>03/03/2026                                                  | Candidate/Officeholder name<br>Office sought<br>Office held                                              |                                                                                                                                                                                                               |
| Payee name<br>LGM Job For You                                       |                                                                                                          |                                                                                                                                                                                                               |
| Amount (\$)<br>\$2,000.00                                           | Payee address; City; State; Zip Code<br>3666 Versailles Dr.<br><br>San Antonio, TX 78219                 |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                               |
| Date<br>03/03/2026                                                  | Candidate/Officeholder name<br>Office sought<br>Office held                                              |                                                                                                                                                                                                               |
| Payee name<br>LGM Job For You                                       |                                                                                                          |                                                                                                                                                                                                               |
| Amount (\$)<br>\$2,000.00                                           | Payee address; City; State; Zip Code<br>3666 Versailles Dr.<br><br>San Antonio, TX 78219                 |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                               |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |  |                                                                                                          |  |                                                                                                                                                                                                               |  |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 29/55 Rpt: 63/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                             |  |
| <b>4</b> Date<br>03/04/2026                                         |  | <b>5</b> Payee name<br>LGM Job For You                                                                   |  |                                                                                                                                                                                                               |  |
| <b>6</b> Amount (\$)<br>\$706.00                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>3666 Versailles Dr.<br><br>San Antonio, TX 78219        |  |                                                                                                                                                                                                               |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  |                                                                                                          |  |                                                                                                                                                                                                               |  |
| Date<br>02/27/2026                                                  |  | Candidate/Officeholder name<br>Payee name<br>Laurence, Robert                                            |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$1,127.00                                           |  | Payee address; City; State; Zip Code<br>106 Chicago Blvd<br><br>San Antonio, TX 78210                    |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |                                                                                                          |  |                                                                                                                                                                                                               |  |
| Date<br>03/04/2026                                                  |  | Candidate/Officeholder name<br>Payee name<br>Laurence, Robert                                            |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$1,138.50                                           |  | Payee address; City; State; Zip Code<br>106 Chicago Blvd<br><br>San Antonio, TX 78210                    |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  |                                                                                                          |  |                                                                                                                                                                                                               |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

|                                                                     |                                                                                                                                                          |                                                                                                                                                                                                                                                    |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 30/55 Rpt: 64/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                                    | <b>3</b> Filer ID                                                                                                                                                                                                                                  |
| <b>4</b> Date<br>04/17/2026                                         | <b>5</b> Payee name<br>Lorena "Lorraine" Pulido Campaign                                                                                                 |                                                                                                                                                                                                                                                    |
| <b>6</b> Amount (\$)<br>\$250.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>1602 Sunbend Falls<br><br>San Antonio, TX 78224                                                         |                                                                                                                                                                                                                                                    |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign donation                                        |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                                          |
| Date<br>06/30/2026                                                  | Payee name<br>Loves Fuel Stop                                                                                                                            |                                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$18.75                                              | Payee address; City; State; Zip Code<br>11361 IH 35<br><br>San Antonio, TX 78073                                                                         |                                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District                                                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fuel trip to convention in Corpus Christi 6/26 - 6/28/26 |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                                          |
| Date<br>03/23/2026                                                  | Payee name<br>Lyft                                                                                                                                       |                                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$26.75                                              | Payee address; City; State; Zip Code<br>185 Berry St. Ste. 400<br><br>San Francisco, CA 94107                                                            |                                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District                                                        | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                                                              | Office sought Office held                                                                                                                                                                                                                          |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                        |                                                                                                                                                                                                                                         |
|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 31/55 Rpt: 65/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                  | <b>3</b> Filer ID                                                                                                                                                                                                                       |
| <b>4</b> Date<br>03/24/2026                                         | <b>5</b> Payee name<br>Lyft                                                                            |                                                                                                                                                                                                                                         |
| <b>6</b> Amount (\$)<br>\$4.99                                      | <b>7</b> Payee address; City; State; Zip Code<br>185 Berry St. Ste. 400<br><br>San Francisco, CA 94107 |                                                                                                                                                                                                                                         |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24 |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                            | Office sought Office held                                                                                                                                                                                                               |
| Date<br>03/24/2026                                                  | Payee name<br>Lyft                                                                                     |                                                                                                                                                                                                                                         |
| Amount (\$)<br>\$10.00                                              | Payee address; City; State; Zip Code<br>185 Berry St. Ste. 400<br><br>San Francisco, CA 94107          |                                                                                                                                                                                                                                         |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                            | Office sought Office held                                                                                                                                                                                                               |
| Date<br>03/24/2026                                                  | Payee name<br>Lyft                                                                                     |                                                                                                                                                                                                                                         |
| Amount (\$)<br>\$11.92                                              | Payee address; City; State; Zip Code<br>185 Berry St. Ste. 400<br><br>San Francisco, CA 94107          |                                                                                                                                                                                                                                         |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                            | Office sought Office held                                                                                                                                                                                                               |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                        |                                                                                                                                                                                                                                         |
|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 32/55 Rpt: 66/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                  | <b>3</b> Filer ID                                                                                                                                                                                                                       |
| <b>4</b> Date<br>03/24/2026                                         | <b>5</b> Payee name<br>Lyft                                                                            |                                                                                                                                                                                                                                         |
| <b>6</b> Amount (\$)<br>\$14.93                                     | <b>7</b> Payee address; City; State; Zip Code<br>185 Berry St. Ste. 400<br><br>San Francisco, CA 94107 |                                                                                                                                                                                                                                         |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District      | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24 |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                        |                                                                                                                                                                                                                                         |
| Date<br>03/24/2026                                                  | Candidate/Officeholder name                                                                            | Office sought                                                                                                                                                                                                                           |
|                                                                     |                                                                                                        | Office held                                                                                                                                                                                                                             |
| Date<br>03/24/2026                                                  | Payee name<br>Lyft                                                                                     |                                                                                                                                                                                                                                         |
| Amount (\$)<br>\$14.95                                              | Payee address; City; State; Zip Code<br>185 Berry St. Ste. 400<br><br>San Francisco, CA 94107          |                                                                                                                                                                                                                                         |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                        |                                                                                                                                                                                                                                         |
| Date<br>03/25/2026                                                  | Candidate/Officeholder name                                                                            | Office sought                                                                                                                                                                                                                           |
|                                                                     |                                                                                                        | Office held                                                                                                                                                                                                                             |
| Date<br>03/25/2026                                                  | Payee name<br>Lyft                                                                                     |                                                                                                                                                                                                                                         |
| Amount (\$)<br>\$10.92                                              | Payee address; City; State; Zip Code<br>185 Berry St. Ste. 400<br><br>San Francisco, CA 94107          |                                                                                                                                                                                                                                         |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District             | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                        |                                                                                                                                                                                                                                         |
| Date<br>03/25/2026                                                  | Candidate/Officeholder name                                                                            | Office sought                                                                                                                                                                                                                           |
|                                                                     |                                                                                                        | Office held                                                                                                                                                                                                                             |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |  |                                                                                                   |  |                                                                                                                                                                                                               |  |
|---------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 33/55 Rpt: 67/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                             |  | <b>3</b> Filer ID                                                                                                                                                                                             |  |
| <b>4</b> Date<br>03/07/2026                                         |  | <b>5</b> Payee name<br>Lyke, Zack                                                                 |  |                                                                                                                                                                                                               |  |
| <b>6</b> Amount (\$)<br>\$10,000.00                                 |  | <b>7</b> Payee address; City; State; Zip Code<br>327 Rockhill Dr.<br><br>San Antonio, TX 78209    |  |                                                                                                                                                                                                               |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense     |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Election consulting |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                       |  | Office sought                                                                                                                                                                                                 |  |
| Date<br>03/18/2026                                                  |  | Payee name<br>Lyke, Zack                                                                          |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$10,000.00                                          |  | Payee address; City; State; Zip Code<br>327 Rockhill Dr.<br><br>San Antonio, TX 78209             |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense            |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Election consulting        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                       |  | Office sought                                                                                                                                                                                                 |  |
| Date<br>02/27/2026                                                  |  | Payee name<br>Mann, Donavan                                                                       |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$776.25                                             |  | Payee address; City; State; Zip Code<br>5854 Sunbay<br><br>San Antonio, TX 78244                  |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                       |  | Office sought                                                                                                                                                                                                 |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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Candidate/Officeholder/Political Committee  
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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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 34/55 Rpt: 68/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>Mann, Donovan                                                                     |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$862.50                                    | <b>7</b> Payee address; City; State; Zip Code<br>5854 Sunbay<br><br>San Antonio, TX 78244                |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>03/02/2026                                                  | Payee name<br>Martinez, Abriana                                                                          |                                                                                                                                                                                                               |
| Amount (\$)<br>\$920.00                                             | Payee address; City; State; Zip Code<br>5922 Onyx Way<br><br>San Antonio, TX 78222                       |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/27/2026                                                  | Payee name<br>Mena, Pearl                                                                                |                                                                                                                                                                                                               |
| Amount (\$)<br>\$310.50                                             | Payee address; City; State; Zip Code<br>111 Cliff Ave.<br><br>San Antonio, TX 78214                      |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
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Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
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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.

|                                                                     |  |                                                                                                          |  |                                                                                                                                                                                                               |  |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 35/55 Rpt: 69/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                             |  |
| <b>4</b> Date<br>03/04/2026                                         |  | <b>5</b> Payee name<br>Mena, Pearl                                                                       |  |                                                                                                                                                                                                               |  |
| <b>6</b> Amount (\$)<br>\$874.00                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>111 Cliff Ave.<br><br>San Antonio, TX 78214             |  |                                                                                                                                                                                                               |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                 |  |
| Date<br>02/27/2026                                                  |  | Payee name<br>Merino, Rosemary                                                                           |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$615.25                                             |  | Payee address; City; State; Zip Code<br>8230 Meadow Sun Street<br><br>San Antonio, TX 78251              |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                 |  |
| Date<br>03/04/2026                                                  |  | Payee name<br>Merino, Rosemary                                                                           |  |                                                                                                                                                                                                               |  |
| Amount (\$)<br>\$540.50                                             |  | Payee address; City; State; Zip Code<br>8230 Meadow Sun Street<br><br>San Antonio, TX 78251              |  |                                                                                                                                                                                                               |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                 |  |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 36/55 Rpt: 70/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/12/2026                                         | <b>5</b> Payee name<br>Monarch Trophy                                                                    |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$2,100.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>16227 San Pedro<br><br>Hollywood Park, TX 78232         |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fiesta medals       |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>04/13/2026                                                  | Payee name<br>Monarch Trophy                                                                             |                                                                                                                                                                                                               |
| Amount (\$)<br>\$1,943.14                                           | Payee address; City; State; Zip Code<br>16227 San Pedro<br><br>Hollywood Park, TX 78232                  |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fiesta medals       |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/27/2026                                                  | Payee name<br>Muddam, Akshay                                                                             |                                                                                                                                                                                                               |
| Amount (\$)<br>\$143.75                                             | Payee address; City; State; Zip Code<br>13903 Babcock Rd. #3307<br><br>San Antonio, TX 78249             |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                                |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 37/55 Rpt: 71/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                              |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>Muddam, Akshay                                                                    |                                                                                                                                                                                                                |
| <b>6</b> Amount (\$)<br>\$126.50                                    | <b>7</b> Payee address; City; State; Zip Code<br>13903 Babcock Rd. #3307<br><br>San Antonio, TX 78249    |                                                                                                                                                                                                                |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                      |
| Date<br>03/06/2026                                                  | Payee name<br>NE Bexar County Democrats                                                                  |                                                                                                                                                                                                                |
| Amount (\$)<br>\$670.00                                             | Payee address; City; State; Zip Code<br>PO Box 700766<br><br>San Antonio, TX 78270                       |                                                                                                                                                                                                                |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense           | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ad in event program  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                      |
| Date<br>03/03/2026                                                  | Payee name<br>NGP VAN                                                                                    |                                                                                                                                                                                                                |
| Amount (\$)<br>\$100.00                                             | Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005              |                                                                                                                                                                                                                |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                      |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                                |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 38/55 Rpt: 72/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                              |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>NGP VAN                                                                           |                                                                                                                                                                                                                |
| <b>6</b> Amount (\$)<br>\$100.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005     |                                                                                                                                                                                                                |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                          |                                                                                                                                                                                                                |
| Date<br>04/06/2026                                                  | Candidate/Officeholder name<br>NGP VAN                                                                   |                                                                                                                                                                                                                |
| Amount (\$)<br>\$100.00                                             | Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005              |                                                                                                                                                                                                                |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                                |
| Date<br>05/11/2026                                                  | Candidate/Officeholder name<br>NGP VAN                                                                   |                                                                                                                                                                                                                |
| Amount (\$)<br>\$100.00                                             | Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005              |                                                                                                                                                                                                                |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                                |
| Date<br>05/11/2026                                                  | Candidate/Officeholder name<br>NGP VAN                                                                   |                                                                                                                                                                                                                |
| Amount (\$)<br>\$100.00                                             | Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005              |                                                                                                                                                                                                                |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |                                                                                                          |                                                                                                                                                                                                                |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## 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.

|                                                                     |  |                                                                                                          |  |                                                                                                                                                                                                                |  |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 39/55 Rpt: 73/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                              |  |
| <b>4</b> Date<br>05/11/2026                                         |  | <b>5</b> Payee name<br>NGP VAN                                                                           |  |                                                                                                                                                                                                                |  |
| <b>6</b> Amount (\$)<br>\$469.04                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005     |  |                                                                                                                                                                                                                |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                  |  |
| Date<br>06/10/2026                                                  |  | Payee name<br>NGP VAN                                                                                    |  |                                                                                                                                                                                                                |  |
| Amount (\$)<br>\$100.00                                             |  | Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005              |  |                                                                                                                                                                                                                |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                  |  |
| Date<br>06/10/2026                                                  |  | Payee name<br>NGP VAN                                                                                    |  |                                                                                                                                                                                                                |  |
| Amount (\$)<br>\$469.04                                             |  | Payee address; City; State; Zip Code<br>655 15th St. NW Ste 650<br><br>Washington, DC 20005              |  |                                                                                                                                                                                                                |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fundraising software        |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                              |  | Office sought                                                                                                                                                                                                  |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                          |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 40/55 Rpt: 74/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                        |
| <b>4</b> Date<br>02/27/2026                                         | <b>5</b> Payee name<br>Osburn, Colt                                                                      |                                                                                                                                                                                                          |
| <b>6</b> Amount (\$)<br>\$3,000.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>3407 Stallion Creek<br><br>San Antonio, TX 78247        |                                                                                                                                                                                                          |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Director |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                |
| Date<br>03/04/2026                                                  | Payee name<br>Osburn, Colt                                                                               |                                                                                                                                                                                                          |
| Amount (\$)<br>\$1,500.00                                           | Payee address; City; State; Zip Code<br>3407 Stallion Creek<br><br>San Antonio, TX 78247                 |                                                                                                                                                                                                          |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Field Director        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                |
| Date<br>02/23/2026                                                  | Payee name<br>Prestige Printing                                                                          |                                                                                                                                                                                                          |
| Amount (\$)<br>\$1,681.12                                           | Payee address; City; State; Zip Code<br>8 Burwood Lane<br><br>San Antonio, TX 78216                      |                                                                                                                                                                                                          |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Printing Expense                     | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>mailers               |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                                                                          |                                                                                                                                                                                                                       |                   |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 41/55 Rpt: 75/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                                    |                                                                                                                                                                                                                       | <b>3</b> Filer ID |
| <b>4</b> Date<br>02/26/2026                                         | <b>5</b> Payee name<br>Principal Consulting LLC                                                                                                          |                                                                                                                                                                                                                       |                   |
| <b>6</b> Amount (\$)<br>\$250.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>15523 Bayakoa Ct.<br><br>San Antonio, TX 78245                                                          |                                                                                                                                                                                                                       |                   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense                                                                 | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>security for campaign event |                   |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                                                                              | Office sought                                                                                                                                                                                                         | Office held       |
| Date<br>03/02/2026                                                  | Payee name<br>Rangel, Jo Ann                                                                                                                             |                                                                                                                                                                                                                       |                   |
| Amount (\$)<br>\$740.00                                             | Payee address; City; State; Zip Code<br>225 Greer St.<br><br>San Antonio, TX 78210                                                                       |                                                                                                                                                                                                                       |                   |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                                                 | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing         |                   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                                                              | Office sought                                                                                                                                                                                                         | Office held       |
| Date<br>02/28/2026                                                  | Payee name<br>Re-Elect Jalen McKee-Rodriguez                                                                                                             |                                                                                                                                                                                                                       |                   |
| Amount (\$)<br>\$500.00                                             | Payee address; City; State; Zip Code<br>7362 Monets Garden<br><br>San Antonio, TX 78218                                                                  |                                                                                                                                                                                                                       |                   |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign donation           |                   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                                                              | Office sought                                                                                                                                                                                                         | Office held       |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

|                                                                     |                                                                                                             |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 42/55 Rpt: 76/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                       | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>02/27/2026                                         | <b>5</b> Payee name<br>Roddy, Jr., Cecil                                                                    |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$396.75                                    | <b>7</b> Payee address; City; State; Zip Code<br>16500 Henderson Pass, Apt 101<br><br>San Antonio, TX 78232 |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor    | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                                 | Office sought Office held                                                                                                                                                                                     |
| Date<br>03/04/2026                                                  | Payee name<br>Roddy, Jr., Cecil                                                                             |                                                                                                                                                                                                               |
| Amount (\$)<br>\$201.25                                             | Payee address; City; State; Zip Code<br>16500 Henderson Pass, Apt 101<br><br>San Antonio, TX 78232          |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                 | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/27/2026                                                  | Payee name<br>Rodriguez, Veronica                                                                           |                                                                                                                                                                                                               |
| Amount (\$)<br>\$713.00                                             | Payee address; City; State; Zip Code<br>12238 Autumn Cherry<br><br>San Antonio, TX 78254                    |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor           | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                                 | Office sought Office held                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                                |                   |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 43/55 Rpt: 77/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    |                                                                                                                                                                                                                | <b>3</b> Filer ID |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>Rodriguez, Veronica                                                               |                                                                                                                                                                                                                |                   |
| <b>6</b> Amount (\$)<br>\$373.75                                    | <b>7</b> Payee address; City; State; Zip Code<br>12238 Autumn Cherry<br><br>San Antonio, TX 78254        |                                                                                                                                                                                                                |                   |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing  |                   |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought                                                                                                                                                                                                  | Office held       |
| Date<br>02/26/2026                                                  | Payee name<br>Salas, Rene                                                                                |                                                                                                                                                                                                                |                   |
| Amount (\$)<br>\$300.00                                             | Payee address; City; State; Zip Code<br>4427 Texas Jack<br><br>San Antonio, TX 78223                     |                                                                                                                                                                                                                |                   |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Event Expense                        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Security for campaign event |                   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought                                                                                                                                                                                                  | Office held       |
| Date<br>02/27/2026                                                  | Payee name<br>Sergeant, Jared                                                                            |                                                                                                                                                                                                                |                   |
| Amount (\$)<br>\$161.25                                             | Payee address; City; State; Zip Code<br>2617 Roosevelt Ave, #77<br><br>San Antonio, TX 78214             |                                                                                                                                                                                                                |                   |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing         |                   |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought                                                                                                                                                                                                  | Office held       |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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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.

|                                                                     |  |                                                                                                          |  |                                                                                                                                                                                                                  |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 44/55 Rpt: 78/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                                |
| <b>4</b> Date<br>03/04/2026                                         |  | <b>5</b> Payee name<br>Sergeant, Jared                                                                   |  |                                                                                                                                                                                                                  |
| <b>6</b> Amount (\$)<br>\$172.50                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>2617 Roosevelt Ave, #77<br><br>San Antonio, TX 78214    |  |                                                                                                                                                                                                                  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name Office sought Office held                                                    |  |                                                                                                                                                                                                                  |
| Date<br>03/03/2026                                                  |  | Payee name<br>Shipley Do-Nuts                                                                            |  |                                                                                                                                                                                                                  |
| Amount (\$)<br>\$87.35                                              |  | Payee address; City; State; Zip Code<br>1240 Austin Hwy.<br><br>San Antonio, TX 78209                    |  |                                                                                                                                                                                                                  |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense         |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>canvasser staff snacks |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name Office sought Office held                                                    |  |                                                                                                                                                                                                                  |
| Date<br>04/20/2026                                                  |  | Payee name<br>Signature Legacy Promotions                                                                |  |                                                                                                                                                                                                                  |
| Amount (\$)<br>\$81.19                                              |  | Payee address; City; State; Zip Code<br>4025 Feather Lakes Way, Suite 5985<br><br>Kingwood, TX 77399     |  |                                                                                                                                                                                                                  |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense                 |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fiesta vest            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name Office sought Office held                                                    |  |                                                                                                                                                                                                                  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                                                    |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 45/55 Rpt: 79/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                                                  |
| <b>4</b> Date<br>03/11/2026                                         | <b>5</b> Payee name<br>Silva, Lina                                                                       |                                                                                                                                                                                                                                    |
| <b>6</b> Amount (\$)<br>\$11,250.00                                 | <b>7</b> Payee address; City; State; Zip Code<br>1935 Ashby Place<br><br>San Antonio, TX 78201           |                                                                                                                                                                                                                                    |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Volunteer Coordinator                    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                                          |
| Date<br>02/26/2026                                                  | Payee name<br>Snow, David                                                                                |                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$300.00                                             | Payee address; City; State; Zip Code<br>10515 Cougar Chase<br><br>San Antonio, TX 78251                  |                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense                 | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Security for campaign event              |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                                          |
| Date<br>03/05/2026                                                  | Payee name<br>Sound City Productions                                                                     |                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$5,899.63                                           | Payee address; City; State; Zip Code<br>347 E. Quill Dr.<br><br>San Antonio, TX 78228                    |                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Event Expense                 | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>sound technical services for Watch Party |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                                          |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                   |                                                                                                                                                                                                                                                    |
|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 46/55 Rpt: 80/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                             | <b>3</b> Filer ID                                                                                                                                                                                                                                  |
| <b>4</b> Date<br>06/30/2026                                         | <b>5</b> Payee name<br>Speedy Express                                                             |                                                                                                                                                                                                                                                    |
| <b>6</b> Amount (\$)<br>\$96.64                                     | <b>7</b> Payee address; City; State; Zip Code<br>10538 Hwy 359<br><br>Mathis, TX 78368            |                                                                                                                                                                                                                                                    |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>fuel trip to convention in Corpus Christi 6/26 - 6/28/26 |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                                                                          |
| Date<br>03/26/2026                                                  | Payee name<br>St. Regis Hotel                                                                     |                                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$1,187.32                                           | Payee address; City; State; Zip Code<br>923 16th Street NW<br><br>Washington, DC 20006            |                                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>lodging for Washington DC trip 3/23 - 3/24               |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                                                                          |
| Date<br>02/23/2026                                                  | Payee name<br>Starbucks                                                                           |                                                                                                                                                                                                                                                    |
| Amount (\$)<br>\$31.36                                              | Payee address; City; State; Zip Code<br>2202 Fredericksburg Rd.<br><br>San Antonio, TX 78201      |                                                                                                                                                                                                                                                    |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff drinks                                    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                                                                          |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |  |                                                                                                                                                          |  |                                                                                                                                                                                                                |  |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 47/55 Rpt: 81/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                              |  |
| <b>4</b> Date<br>03/13/2026                                         |  | <b>5</b> Payee name<br>Susan Harry Consulting, LLC                                                                                                       |  |                                                                                                                                                                                                                |  |
| <b>6</b> Amount (\$)<br>\$9,840.50                                  |  | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 301074<br><br>Austin, TX 78703                                                                   |  |                                                                                                                                                                                                                |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor                                                 |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Fundraising Director |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                                                                              |  | Office sought Office held                                                                                                                                                                                      |  |
| Date<br>02/23/2026                                                  |  | Payee name<br>Tank's Pizza                                                                                                                               |  |                                                                                                                                                                                                                |  |
| Amount (\$)<br>\$28.83                                              |  | Payee address; City; State; Zip Code<br>902 N. New Braunfels<br><br>San Antonio, TX 78202                                                                |  |                                                                                                                                                                                                                |  |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                                                         |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff meal  |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                                                                              |  | Office sought Office held                                                                                                                                                                                      |  |
| Date<br>06/17/2026                                                  |  | Payee name<br>Texas Democratic Party                                                                                                                     |  |                                                                                                                                                                                                                |  |
| Amount (\$)<br>\$2,500.00                                           |  | Payee address; City; State; Zip Code<br>PO Box 15707<br><br>Austin, TX 78761                                                                             |  |                                                                                                                                                                                                                |  |
| PURPOSE OF EXPENDITURE                                              |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation             |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                                                                              |  | Office sought Office held                                                                                                                                                                                      |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |  |                                                                                                                                                          |  |                                                                                                                                                                                                                           |  |
|---------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 48/55 Rpt: 82/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                                                                    |  | <b>3</b> Filer ID                                                                                                                                                                                                         |  |
| <b>4</b> Date<br>06/18/2026                                         |  | <b>5</b> Payee name<br>Texas Democratic Party                                                                                                            |  |                                                                                                                                                                                                                           |  |
| <b>6</b> Amount (\$)<br>\$500.00                                    |  | <b>7</b> Payee address; City; State; Zip Code<br>PO Box 15707<br><br>Austin, TX 78761                                                                    |  |                                                                                                                                                                                                                           |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>table sponsorship at convention |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                                                                              |  | Office sought                                                                                                                                                                                                             |  |
| Date<br>06/25/2026                                                  |  | Payee name<br>Texas Democratic Party                                                                                                                     |  |                                                                                                                                                                                                                           |  |
| Amount (\$)<br>\$5,000.00                                           |  | Payee address; City; State; Zip Code<br>PO Box 15707<br><br>Austin, TX 78761                                                                             |  |                                                                                                                                                                                                                           |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>convention sponsorship                 |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                                                                              |  | Office sought                                                                                                                                                                                                             |  |
| Date<br>02/25/2026                                                  |  | Payee name<br>The Friendly Spot                                                                                                                          |  |                                                                                                                                                                                                                           |  |
| Amount (\$)<br>\$23.10                                              |  | Payee address; City; State; Zip Code<br>943 S. Alamo<br><br>San Antonio, TX 78205                                                                        |  |                                                                                                                                                                                                                           |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense                                                                |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff meal                    |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                                                                              |  | Office sought                                                                                                                                                                                                             |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                  |                                                                                                                                                                                                                  |
|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 49/55 Rpt: 83/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                            | <b>3</b> Filer ID                                                                                                                                                                                                |
| <b>4</b> Date<br>02/25/2026                                         | <b>5</b> Payee name<br>The Friendly Spot                                                         |                                                                                                                                                                                                                  |
| <b>6</b> Amount (\$)<br>\$35.95                                     | <b>7</b> Payee address; City; State; Zip Code<br>943 S. Alamo<br><br>San Antonio, TX 78205       |                                                                                                                                                                                                                  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff meal    |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                      | Office sought      Office held                                                                                                                                                                                   |
| Date<br>02/26/2026                                                  | Payee name<br>The Sauce                                                                          |                                                                                                                                                                                                                  |
| Amount (\$)<br>\$750.00                                             | Payee address; City; State; Zip Code<br>3410 Cambria Way<br><br>San Antonio, TX 78251            |                                                                                                                                                                                                                  |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Advertising Expense   | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>live stream production |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                      | Office sought      Office held                                                                                                                                                                                   |
| Date<br>03/04/2026                                                  | Payee name<br>Tip Top Cafe                                                                       |                                                                                                                                                                                                                  |
| Amount (\$)<br>\$101.63                                             | Payee address; City; State; Zip Code<br>2814 Fredericksburg Rd.<br><br>San Antonio, TX 78201     |                                                                                                                                                                                                                  |
| PURPOSE OF EXPENDITURE                                              | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Food/Beverage Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>campaign staff meal    |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                      | Office sought      Office held                                                                                                                                                                                   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 50/55 Rpt: 84/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/02/2026                                         | <b>5</b> Payee name<br>Trevino, Emma                                                                     |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$1,780.00                                  | <b>7</b> Payee address; City; State; Zip Code<br>143 County Road 789<br><br>Natalia, TX 78059            |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>02/27/2026                                                  | Payee name<br>Trevino, Raquel                                                                            |                                                                                                                                                                                                               |
| Amount (\$)<br>\$333.50                                             | Payee address; City; State; Zip Code<br>143 CR 789<br><br>Natalia, TX 78059                              |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |
| Date<br>03/04/2026                                                  | Payee name<br>Trevino, Raquel                                                                            |                                                                                                                                                                                                               |
| Amount (\$)<br>\$356.50                                             | Payee address; City; State; Zip Code<br>143 CR 789<br><br>Natalia, TX 78059                              |                                                                                                                                                                                                               |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                              | Office sought Office held                                                                                                                                                                                     |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| <b>EXPENDITURE CATEGORIES FOR BOX 8(a)</b><br><div> <div>Advertising Expense<br/>Accounting/Banking<br/>Consulting Expense<br/>Contributions/ Donations Made By -<br/>Candidate/Officeholder/Political Committee<br/>Credit Card Payment</div> <div>Event Expense<br/>Fees<br/>Food/Beverage Expense<br/>Gift/Awards/Memorials Expense<br/>Legal Services</div> <div>Loan Repayment/Reimbursement<br/>Office Overhead/Rental Expense<br/>Polling Expense<br/>Printing Expense<br/>Salaries/Wages/Contract Labor</div> <div>Solicitation/Fundraising Expense<br/>Transportation Equipment &amp; Related Expense<br/>Travel in District<br/>Travel Out of District<br/>OTHER (enter a category not listed above)</div> </div> |  |  |  |
| The Instruction Guide explains how to complete this form.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |

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|---------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 51/55 Rpt: 85/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                             | <b>3</b> Filer ID                                                                                                                                                                                                                       |
| <b>4</b> Date<br>03/27/2026                                         | <b>5</b> Payee name<br>Uber                                                                       |                                                                                                                                                                                                                                         |
| <b>6</b> Amount (\$)<br>\$590.04                                    | <b>7</b> Payee address; City; State; Zip Code<br>1725 3rd St.<br><br>San Francisco, CA 94158      |                                                                                                                                                                                                                                         |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24 |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                                                               |
| Date<br>03/23/2026                                                  | Payee name<br>Uber                                                                                |                                                                                                                                                                                                                                         |
| Amount (\$)<br>\$56.97                                              | Payee address; City; State; Zip Code<br>1725 3rd St.<br><br>San Francisco, CA 94158               |                                                                                                                                                                                                                                         |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                                                               |
| Date<br>03/24/2026                                                  | Payee name<br>Uber                                                                                |                                                                                                                                                                                                                                         |
| Amount (\$)<br>\$3.00                                               | Payee address; City; State; Zip Code<br>1725 3rd St.<br><br>San Francisco, CA 94158               |                                                                                                                                                                                                                                         |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                       | Office sought Office held                                                                                                                                                                                                               |



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |  |                                                                                                   |  |                                                                                                                                                                                                                                          |  |
|---------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>1</b> Total pages Schedule F1:<br>Sch: 52/55 Rpt: 86/90          |  | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                             |  | <b>3</b> Filer ID                                                                                                                                                                                                                        |  |
| <b>4</b> Date<br>03/24/2026                                         |  | <b>5</b> Payee name<br>Uber                                                                       |  |                                                                                                                                                                                                                                          |  |
| <b>6</b> Amount (\$)<br>\$16.07                                     |  | <b>7</b> Payee address; City; State; Zip Code<br>1725 3rd St.<br><br>San Francisco, CA 94158      |  |                                                                                                                                                                                                                                          |  |
| <b>8</b> PURPOSE OF EXPENDITURE                                     |  | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Travel Out of District |  | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24  |  |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH |  | Candidate/Officeholder name                                                                       |  | Office sought                                                                                                                                                                                                                            |  |
| Date<br>03/24/2026                                                  |  | Payee name<br>Uber                                                                                |  |                                                                                                                                                                                                                                          |  |
| Amount (\$)<br>\$16.83                                              |  | Payee address; City; State; Zip Code<br>1725 3rd St.<br><br>San Francisco, CA 94158               |  |                                                                                                                                                                                                                                          |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        |  | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>ride share for Washington DC trip 3/23 - 3/24         |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                       |  | Office sought                                                                                                                                                                                                                            |  |
| Date<br>03/20/2026                                                  |  | Payee name<br>United Airlines                                                                     |  |                                                                                                                                                                                                                                          |  |
| Amount (\$)<br>\$1,144.15                                           |  | Payee address; City; State; Zip Code<br>233 S. Wacker Dr.<br><br>Chicago, IL 60606                |  |                                                                                                                                                                                                                                          |  |
| PURPOSE OF EXPENDITURE                                              |  | (a) Category (See Categories listed at the top of this schedule)<br>Travel Out of District        |  | (b) Description<br><input checked="" type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>airfare for Washington DC trip 3/23 - 3/24 |  |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          |  | Candidate/Officeholder name                                                                       |  | Office sought                                                                                                                                                                                                                            |  |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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.

|                                                                     |                                                                                               |                                                                                                                                                                                                             |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 53/55 Rpt: 87/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                         | <b>3</b> Filer ID                                                                                                                                                                                           |
| <b>4</b> Date<br>03/06/2026                                         | <b>5</b> Payee name<br>Viva Politics LLC                                                      |                                                                                                                                                                                                             |
| <b>6</b> Amount (\$)<br>\$20,000.00                                 | <b>7</b> Payee address; City; State; Zip Code<br>135 Furr Dr.<br><br>San Antonio, TX 78201    |                                                                                                                                                                                                             |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Consulting Expense | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Director |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                   | Office sought Office held                                                                                                                                                                                   |
| Date<br>03/30/2026                                                  | Payee name<br>Viva Politics LLC                                                               |                                                                                                                                                                                                             |
| Amount (\$)<br>\$45,490.00                                          | Payee address; City; State; Zip Code<br>135 Furr Dr.<br><br>San Antonio, TX 78201             |                                                                                                                                                                                                             |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Director        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                   | Office sought Office held                                                                                                                                                                                   |
| Date<br>05/29/2026                                                  | Payee name<br>Viva Politics LLC                                                               |                                                                                                                                                                                                             |
| Amount (\$)<br>\$40,679.78                                          | Payee address; City; State; Zip Code<br>135 Furr Dr.<br><br>San Antonio, TX 78201             |                                                                                                                                                                                                             |
| PURPOSE OF EXPENDITURE                                              | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense        | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Director        |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH          | Candidate/Officeholder name                                                                   | Office sought Office held                                                                                                                                                                                   |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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:<br>Sch: 54/55 Rpt: 88/90          |                                                                                                                                                   | 2 FILER NAME<br>Nirenberg, Ron                                                           |                                                                                                                                                                                                         | 3 Filer ID |
| 4 Date<br>06/25/2026                                         |                                                                                                                                                   | 5 Payee name<br>Viva Politics LLC                                                        |                                                                                                                                                                                                         |            |
| 6 Amount (\$)<br>\$33,000.00                                 |                                                                                                                                                   | 7 Payee address; City; State; Zip Code<br>135 Furr Dr.<br><br>San Antonio, TX 78201      |                                                                                                                                                                                                         |            |
| 8 PURPOSE OF EXPENDITURE                                     | (a) Category (See Categories listed at the top of this schedule)<br>Consulting Expense                                                            |                                                                                          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Campaign Director    |            |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH |                                                                                                                                                   | Candidate/Officeholder name Office sought Office held                                    |                                                                                                                                                                                                         |            |
| Date<br>06/02/2026                                           |                                                                                                                                                   | Payee name<br>World Affairs Council of San Antonio                                       |                                                                                                                                                                                                         |            |
| Amount (\$)<br>\$1,000.00                                    |                                                                                                                                                   | Payee address; City; State; Zip Code<br>1527 S. Cooper St.<br><br>San Antonio, TX 76010  |                                                                                                                                                                                                         |            |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Fees                                                                          |                                                                                          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>membership fee       |            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |                                                                                                                                                   | Candidate/Officeholder name Office sought Office held                                    |                                                                                                                                                                                                         |            |
| Date<br>05/26/2026                                           |                                                                                                                                                   | Payee name<br>YMCA of Greater SA                                                         |                                                                                                                                                                                                         |            |
| Amount (\$)<br>\$118.30                                      |                                                                                                                                                   | Payee address; City; State; Zip Code<br>3122 Roosevelt Ave.<br><br>San Antonio, TX 78214 |                                                                                                                                                                                                         |            |
| PURPOSE OF EXPENDITURE                                       | (a) Category (See Categories listed at the top of this schedule)<br>Contributions/Donations Made By<br>Candidate/Officeholder/Political Committee |                                                                                          | (b) Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>donation/sponsorship |            |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH   |                                                                                                                                                   | Candidate/Officeholder name Office sought Office held                                    |                                                                                                                                                                                                         |            |

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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.

|                                                                     |                                                                                                          |                                                                                                                                                                                                               |
|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1</b> Total pages Schedule F1:<br>Sch: 55/55 Rpt: 89/90          | <b>2</b> FILER NAME<br>Nirenberg, Ron                                                                    | <b>3</b> Filer ID                                                                                                                                                                                             |
| <b>4</b> Date<br>03/04/2026                                         | <b>5</b> Payee name<br>Young, Latrisha                                                                   |                                                                                                                                                                                                               |
| <b>6</b> Amount (\$)<br>\$229.00                                    | <b>7</b> Payee address; City; State; Zip Code<br>7404 Hanzi St Apt C<br><br>San Antonio, TX 78223        |                                                                                                                                                                                                               |
| <b>8</b> PURPOSE OF EXPENDITURE                                     | <b>(a)</b> Category (See Categories listed at the top of this schedule)<br>Salaries/Wages/Contract Labor | <b>(b)</b> Description<br><input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.<br><input type="checkbox"/> Check if Austin, TX, officeholder living expense<br>Outreach/Canvassing |
| <b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name                                                                              | Office sought      Office held                                                                                                                                                                                |

# 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:  
Sch: 1/1 Rpt: 90/90

2 FILER NAME

Nirenberg, Ron

3 Filer ID

4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

Enterprise Rental Car

5 Contribution / Expenditure reported on:

☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☒ Schedule F1  
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC

6 Dates of Travel

03/23/2026

03/24/2026

7 Name of person(s) traveling

Ron, Nirenberg

8 Departure city or name of departure location

San Antonio

9 Destination city or name of destination location

Washington DC

10 Means of transportation

Commercial Automobile

11 Purpose of travel (including name of conference, seminar, or other event)

moderating a mayoral panel at the Sister Cities Int'l 70th anniversary conference

Name of Contributor / Corporation or Labor Organization / Pledgor /Payee

United Airlines

Contribution / Expenditure reported on:

☐ Schedule A2 ☐ Schedule B ☐ Schedule B(J) ☐ Schedule C2 ☐ Schedule D ☒ Schedule F1  
☐ Schedule F2 ☐ Schedule F4 ☐ Schedule G ☐ Schedule H ☐ Schedule COH-UC

Dates of Travel

03/23/2026

03/24/2026

Name of person(s) traveling

Nirenberg, Ron

Departure city or name of departure location

San Antonio

Destination city or name of destination location

Washington DC

Means of transportation

Commercial Airplane

Purpose of travel (including name of conference, seminar, or other event)

moderating a mayoral panel at the Sister Cities Int'l 70th anniversary conference

