FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 22 00086159 CANDIDATE / MS / MRS / MR **FIRST** ΜI **OFFICE USE ONLY OFFICEHOLDER** Mr. Gerald B. NAME Date Received NICKNAME LAST **SUFFIX** Lopez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 7835 Emerald Elm MAILING Amount Receipt # **ADDRESS** Change of Address San Antonio, TX 78251 Date Processed Date Imaged CAMPAIGN MS/MRS/MR FIRST ΜI **TREASURER** NAME NICKNAME LAST **SUFFIX** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR) 8th day before election Exceeded modified July 15 reporting limit **PERIOD** Month Day Year Month Day Year **COVERED THROUGH** 03/28/2023 04/28/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 05/06/2023 χ General Special

GO TO PAGE 2

12 OFFICE SOUGHT (if known)

11 OFFICE

OFFICE HELD (if any)

Trustee Place 2 District NISD Bexar

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 22

13 C / OH NAME	Lopez, Gerald B. (Mr)	14 Filer ID 00086159	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or polit These expenditures may have been r officeholders are required to report th	nade without the candidate's or office	eholder's knowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Good Governance PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	PO Box 90851		
		San Antonio, TX 78209		
		COMMITTEE CAMPAIGN TREASUR	RER NAME	
		Mora, Linda		
		COMMITTEE CAMPAIGN TREASUR	RER ADDRESS	
		P.O. Box 90851		
		San Antonio, TX 78209		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (ES OF LOANS, OR CONTRIBUTION:		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEE	ES OF LOANS)	\$ 5,258.35
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 4,998.64
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED / RIOD	AS OF THE LAST DAY OF THE	\$ 1,471.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING TING PERIOD	G LOANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT			under penalty of perjury, that the acc nd includes all information required t ection Code.	
			Signature of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and sea		
Signature of officers	cer administering	Printed name of officer administ	ering Title of office	r administering oath
-	,			-

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH ADDENDUM

Page 3 of 22

				Fage 3 of 22
C / OH NAME	Lopez, Gerald B. (Mr.)	Filer ID 00086159	(Ethics Commission Filers)
7 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have b	of political expenditures by political committees to so been made without the candidate's or officeholder's d to report this information only if they receive notice	knowledge or co	onsent. Candidates and
` ,	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Narthside AFT Committee on Political Educa	ation	
		COMMITTEE ADDRESS		
	SPECIFIC	6502 Bandera Road Ste # 202		
		San Antonio , TX 78238		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Monis, HArron		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		6502 Bandera Road Ste # 202		
		San Antonio, TX 78238		

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM JC/OH ADDENDUM

Page 4 of 22

				1 age 1 61 22
C / OH NAME	Lopez, Gerald B. (Mr	.)	Filer ID 00086159	(Ethics Commission Filers)
17 NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have I	of political expenditures by political committees to so been made without the candidate's or officeholder's d to report this information only if they receive notice	s knowledge or co	onsent. Candidates and
` ,	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Narthside AFT Committee on Political Educ	ation	
	X GENERAL	COMMITTEE ADDRESS		
		6502 Bandera Road Ste # 202		
	SPECIFIC	5502 Bandera Road Ste # 252		
		San Antonio , TX 78238		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Monis, HArron		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
		6502 Bandera Road Ste # 202		
		San Antonio, TX 78238		
	•	•		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				5 of 22
18 FILER NAI	(Ethics Com	nmission Filers)		
•	erald B. (Mr.)	00086159		
	E SUBTOTALS SCHEDULE		SUBTO	OTAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	3,146.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,112.35
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	4,998.64
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 6/22	
2	FILER NAME Lopez, Gera	ld B. (Mr.)		3	Filer ID (Ethics Commission 00086159	on Filers)
4	Date 04/13/2023	 5 Full name of contributor out-of-state PAC (ID#:_Good Governance PAC 6 Contributor address; City; State; Zip Code P.O. Box 90851)	7	Amount of Contribution (\$)	\$800.00
_	Dringing Local	san antonio, TX 78209	D. Employer (Coo Instructions	_		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 04/14/2023	Full name of contributor out-of-state PAC (ID#:_ Joeris, Gary (Mr.) Contributor address; City; State; Zip Code P.O Box 790086 San Antonio , TX 78279			Amount of Contribution (\$)	\$1,000.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Joeris Construction	5)		
	Date 04/18/2023	Full name of contributor out-of-state PAC (ID#:) Keough, Steven (Mr.) Contributor address; City; State; Zip Code 10422 Huebner Rd Apt 2609			Amount of Contribution (\$)	\$96.00
	Principal occu	San Antonio, TX 78240 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Retired	pation 7 oob title (occ motituditions)	Retired	,,		
	Date 04/20/2023	Full name of contributor out-of-state PAC (ID#:_Ramon, Timothy (CEO) Contributor address; City; State; Zip Code 20790 E Tejas Trial San Antonio , TX 78257			Amount of Contribution (\$)	\$1,000.00
	Principal occu Demolition	pation / Job title (See Instructions)	Employer (See Instructions JR Ramon & Sons	5)		
	Date 04/18/2023	Full name of contributor out-of-state PAC (ID#:_ Rodriguez, Justin (The Honorable) Contributor address; City; State; Zip Code P.O. Box 100153 San Antonio , TX 78201			Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Bexar County	5)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 7/22 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Lopez, Gerald B. (Mr.) 00086159 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 04/13/2023 Northside AFT Committee on Political Education \$1,324.35 | Postage 7 Contributor address; City; State; Zip Code 6502 Bandera Road Ste # 202 San Antonio, TX 78238 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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) In-kind contribution Date Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) description 04/12/2023 Northside AFT Committee on Political Education \$788.00 Printing Contributor address; City; State; Zip Code 6502 Bandera Road Ste # 202 San Antonio, TX 78238 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to comp	plete	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 1/15 Rpt: 8/22	Lopez, Gerald B. (Mr.)		00086159
4	Date	5 Payee name		-
	04/21/2023	3D Printing		
6	Amount (\$)	7 Payee address; City; State; Zip Code	e	
	\$25.00	8015 W 2nd St		
		Somerset , TX 78069		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) [Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Ĺ	Check if Austin, TX, officeholder living expense
			3	Signs
_	Operated ONE Vitalian et	Condidate (Office halden name		Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	nt	Office held
	Date	Payee name		
	04/20/2023	Alamo Mailing		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$1,103.01	13114 Lookout Run		
		San Antonio, TX 78233		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b) [Description
	OF EXPENDITURE	Advertising Expense	Ē	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			L	Mailing
				9
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/O			
	Date	Payee name		
	04/20/2023	Blue Star Brewing		
	Amount (\$)	Payee address; City; State; Zip Code	ρ.	
	\$55.95	1414 S Alamo Ste 105	•	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		san antonio, TX 78210		
	PURPOSE		h) [Description
	OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	υ, _L Γ	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Constitution, and along Expense	į	Check if Austin, TX, officeholder living expense
			L	unch with donor
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/Ol	1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/15 Rpt: 9/22	Lopez, Gerald B. (Mr.) 00086159
4	Date	5 Payee name
	04/10/2023	Bubba's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$53.09	7518 NW Loop 410
		san antonio, TX 78251
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food for Volunteer
		Food for Volunteer
Ļ	0 1: 0 1: 0	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	04/08/2023	Bubba's
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.07	7518 NW Loop 410
		san antonio, TX 78251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense food for volunteer
		1000 for volunteer
┡	Operation ONE Wife disease	Occasional Office health
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	<u> </u>	
	Date	Payee name
	04/07/2023	Bubba's
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.39	7518 NW Loop 410
		san antonio, TX 78251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		food for volunteer
$ldsymbol{f eta}$		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiencies to benefit C/OI	'
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/15 Rpt: 10/22	Lopez, Gerald B. (Mr.) Consider the second
4 Date	5 Payee name
04/25/2023	CIRCLE K
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$15.82	8214 Culebra rd
	san antonio, TX 78251
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	for poll watcher
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/6/	
Date	Payee name
04/15/2023	CIRCLE K
Amount (\$)	Payee address; City; State; Zip Code
\$30.00	8214 Culebra rd
	san antonio, TX 78251
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	fuel
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	• · · · · · · · · · · · · · · · · · · ·
Date	Payee name
04/26/2023	Church's Chicken
Amount (\$)	Payee address; City; State; Zip Code
\$19.44	8995 Grissom Rd
	San Antonio , TX 78251
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Poll watchers
	Foil wateriers
Complete CALL V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
	Credit Card Fayinent	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/15 Rpt: 11/22	Lopez, Gerald B. (Mr.)	00086159
4	Date	5 Payee name	
	04/02/2023	Cricket Wireless	
_			
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$119.00	1025 Lenox park Blvd NE	
		Atlanta , GA 30319	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
	EXPENDITURE	l	TX, officeholder living expense
		phones	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
	Date	Payee name	
	04/26/2023	Dollar General	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.67	9179 Grissom rd	
	φ+3.07	3173 013301114	
		san antonio, TX 78251	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		outside of Texas. Complete Schedule T.
		LI Check IT AUSUN, lunch bags	TX, officeholder living expense
		lunch bags	
	0 1: 0.11.7.7.1.		000
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/26/2023	Dollar General	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$43.67	9881 Culebra rd	
		san antonio, TX 78251	
	DUDDOCE		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel of	outside of Texas. Complete Schedule T.
	EXPENDITURE	Event Expense	TX, officeholder living expense
		lunch bags	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		C555.2

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ment Solicitation/Fundraising Expense
nse Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (potter a category not listed above)

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/15 Rpt: 12/22	Lopez, Gerald B. (Mr.) 00086159
4 [Date	5 Payee name
(04/19/2023	EIG*CONSTANTCONTACT.CO
6 /	Amount (\$) \$21.32	7 Payee address; City; State; Zip Code 1601 Trapelo RD Waltham, MA 02451
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense email messaging
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
[Date	Payee name
(04/24/2023	Exxon
,	Amount (\$) \$11.43	Payee address; City; State; Zip Code 7880 Culebra rd san antonio, TX 78251
	PURPOSE	
	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Drinks for poll watchers
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
[Date	Payee name
(04/21/2023	Exxon
,	Amount (\$) \$22.27	Payee address; City; State; Zip Code 7880 Culebra rd
		san antonio, TX 78251
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
_	Sch: 6/15 Rpt: 13/22	Lopez, Gerald B. (Mr.) Control of the state
4	Date	5 Payee name
	04/15/2023	Great Northwest
6	Amount (\$) \$80.00	7 Payee address; City; State; Zip Code 8809 Timberwilde san antonio, TX 78250
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Newsletter
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/24/2023	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$78.27	9255 Grissom Rd
	PUPPOS	San Antonio, TX 78251
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	04/24/2023	La Tapatia Taqueria
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.00	7891 culebra rd
		SAN ANTONIO, TX 78227
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		food poll watchers
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

/Reimbursement
Rental Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/15 Rpt: 14/22	Lopez, Gerald B. (Mr.) 00086159
4	Date	5 Payee name
	04/03/2023	Lopez Jr., Leonard (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	306 Mahogany Chest
		San Antonio, TX 78249
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense Design work
		Design work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
F	Data	
	Date	Payee name
	03/28/2023	Lopez Jr., Leonard (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	306 Mahogany Chest
		San Antonio, TX 78249
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense design work
		ucsign work
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
H	Date	Payeo namo
	04/02/2023	Payee name MURPHY / WALMART
	Amount (\$) \$40.01	Payee address; City; State; Zip Code
	\$40.01	7639 Northwest Loop 410
		San Antonio, TX 78251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	PURPOSE OF EXPENDITURE	Travel In District
	OF	
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fuel
	OF	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fuel Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fuel Candidate/Officeholder name Office sought Office held
	OF EXPENDITURE Complete ONLY if direct	Travel In District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense fuel Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/15 Rpt: 15/22 Lopez, Gerald B. (Mr.) 00086159 4 Date Payee name 04/26/2023 McDonald's 6 Amount (\$) Payee address; City; State; Zip Code \$10.89 8349 Culebra rd san antonio, TX 78251 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense poll watcher Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/26/2023 McDonald's Amount (\$) Payee address; City; State; Zip Code \$4.96 8349 Culebra rd san antonio, TX 78251 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense coffee for a poll watcher Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/26/2023 NNT GUILBEAU FOOD Amount (\$) Payee address: City: State; Zip Code \$43.67 9094 Guilbeau road San Antonio, TX 78250 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense For Volunteers Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID	(Ethics Commission Filers)
	Sch: 9/15 Rpt: 16/22	Lopez, Gerald B. (Mr.) 0008615	9
4	Date	5 Payee name	
	04/21/2023	PF Changs	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$67.37	255 E Basse rd	
		san antonio, TX 78209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
	EXPENDITORE	Check if Austin, TX, officeholder liv	ring expense
		Lunch With Donor	
9	Operation ONLY if dispose	Our did to 100% or had to marke	la a lal
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office Office	neia
┡	· 		
	Date	Payee name	
	04/13/2023	ParkingCOM	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$18.99	420 Broadway	
l			
l		san antonio, TX 78205	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. C	
l		Parking	ing expense
l			
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office	held
	expenditure to benefit C/OI		
F	Date	Payee name	
	04/20/2023	QT-QuikTrip	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$42.18		
	· · · · · ·		
l		San Antonio, TX 78251	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. C	omplete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder liv	•
		Fuel	
L			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office	held
	experiulture to beliefft C/OI	אוע	
_			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/15 Rpt: 17/22	Lopez, Gerald B. (Mr.) 00086159
4	Date	5 Payee name
	04/14/2023	QT-QuikTrip
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.00	7230 Culebra Rd
		San Antonio, TX 78251
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense fuel
		Tuci
Ļ	Commiste ONII V if disent	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
┕	·	
	Date	Payee name
	04/18/2023	SOUTH TEXAS PRESS INC
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$627.68	300 Arbor Pl
		San Antonio, TX 78202
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		printing
		printing
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	•
┕		
	Date	Payee name
	04/24/2023	Sosa, Tony (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	7903 emerald elm
		san antonio, TX 78251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
1		Work for "A " Frame
L		
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
L	experiorale to belieff C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/15 Rpt: 18/22	Lopez, Gerald B. (Mr.) 00086159
4	Date	5 Payee name
	04/17/2023	Sosa, Tony (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$150.00	7903 emerald elm
		san antonio, TX 78251
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Material for "A" Frame
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	04/26/2023	Taco Bell
H	Amount (\$)	Payee address; City; State; Zip Code
	\$60.67	9263 Culebra rd
		san antonio, TX 78251
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		food for poll watcher
		lood for poil waterier
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experience to benefit Gree	
	Date	Payee name
	04/21/2023	Texas Best
	Amount (\$)	Payee address; City; State; Zip Code
	\$29.09	14650 I-35
		Von Ormy, TX 78073
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Political signs
		Folitical signs
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	•
dash		
L		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/15 Rpt: 19/22	Lopez, Gerald B. (Mr.) 00086159
4	Date	5 Payee name
	04/15/2023	Tias Tacos
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.03	6820 Huebner rd
		leon Valley, TX 78238
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Mtg with NISD candidate
_	Operation ONLY if direct	Open fields to 100% as helder a result.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/20/2023	Trail Blazer Campaign Services, Inc
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	5832 Lincoln Dr., Suite 149
		Edina, MN 55436
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Polling Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Software services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/13/2023	VISTAPRINT
	Amount (\$)	Payee address; City; State; Zip Code
	\$310.34	275 Wyman Street
		Waltham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense pushcards
		puoriotardo
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
•	Sch: 13/15 Rpt: 20/22	Lopez, Gerald B. (Mr.) 00086159
4	Date	5 Payee name
	03/30/2023	VISTAPRINT
6	Amount (\$) \$222.97	7 Payee address; City; State; Zip Code 275 Wyman Street Waltham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense advertisers
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/28/2023	VISTAPRINT
	Amount (\$)	Payee address; City; State; Zip Code
	\$258.38	275 Wyman Street
	DUPPOS	Waltham, MA 02451
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if traval outside of Taxas, Camplete Schedule T
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		advertisement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/16/2023	WAL-MART #5226
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.38	9526 Military Dr W
		San Antonio, TX 78251
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		misc items
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1: Sch: 14/15 Rpt: 21/22	2 FILER NAME Lopez, Gerald B. (Mr.)		3 Filer ID (Ethics Commission Filers) 00086159
4	Date 04/17/2023	5 Payee name WOK INN		
6	Amount (\$) \$27.11	7 Payee address; City; State; Zip Cod 8733 Grissom Rd san antonio, TX 78251	e	
8	PURPOSE OF EXPENDITURE			Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Lunch Mtg with Block Walkers
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ht	Office held
	Date 04/24/2023	Payee name Walmart		
	Amount (\$) \$189.48	Payee address; City; State; Zip Cod 8923 W Military Dr San Antonio, TX 78245	е	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense MISC
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held
	Date 04/25/2023	Payee name Wendy's		
	Amount (\$) \$37.21	Payee address; City; State; Zip Cod 9535 Culebra Rd	е	
		San Antonio, TX 78251		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense for poll watchers
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Coi	Gift/Awa mmittee Legal Se		Polling Expens Printing Expen Salaries/Wage	se s/Contract Labor		Travel in District Travel Out of Dis	
L	· · · · · · · · · · · · · · · · · · ·			struction Guide explain	s how to compl	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 15/15 Rpt: 22/22		Lopez, Gerald B.	(Mr.)				00086159	
4	Date	5	Payee name				_		
	04/16/2023		Wing Daddy's						
F	Amount (\$)	_		City // Ctot	o: Zin Codo				
ľ		 ′	Payee address;		e; Zip Code				
l	\$42.83	l	10730 Potranco ro	J					
l		l							
l		l	san antonio, TX 7	8251					
8	PURPOSE	(a)	Category (See Category	ories listed at the top of this s	chodulo) (b)	Description			
l	OF	l` ´	Food/Beverage Ex		Siledule)		outs	ide of Texas. Com	plete Schedule T.
l	EXPENDITURE	l	. 000,2010.ago =			Check if Austin	, TX	, officeholder living	expense
l		l				food for volur	nte	ers	
l		l							
9	Complete ONLY if direct		Candidate/Officeholde	er name	Office sought			Office he	eld
	expenditure to benefit C/O				J				
\vdash									