SPECIFIC-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM SPAC COVER SHEET PG 1

T	he SPAC Instruction Guide	explains how to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 115		
3	COMMITTEE NAME Secure San Antonios F			OFFICE USE ONLY		
	Secure San Antonios F	uture		Date Received		
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 300 Convent San Antonio TX 78205	CITY; STATE; ZIP CODE			
L	Change of Address			Date Hand-delivered or Postmarked		
5	CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Gordon	MI	Receipt # Amount		
		NICKNAME LAST Hartman	SUFFIX	Date Processed Date Imaged		
	CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 300 Convent San Antonio TX 78205	APT / SUITE #; CITY;	STATE; ZIP CODE		
7	CAMPAIGN TREASURER MAILING ADDRESS Change of Address	STREET ADDRESS OR PO BOX; 300 Convent San Antonio TX 78205	APT / SUITE #; CITY;	STATE; ZIP CODE		
8	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (210) 633-7369	EXTENSION			
9	REPORT TYPE	8th Day Before Special Election				
10	PERIOD COVERED	Month Day Year 9/28/2018	Month THROUGH	n Day Year 10/27/2018		
11	ELECTION	ELECTION DATE Month Day Year Primary 11/6/2018 X Genera	Descriptio			
	GO TO PAGE 2					

SPECIFIC-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM SPAC COVER SHEET PG 2

12 COMMITTEE NAME	13 Filer ID	(Ethics Commission Filers)			
Secure San Antonios F	uture				
PURPOSE (Attach lists on plain paper to complete this report if necessary.)	X CANDIDATE	CANDIDATE / OFFICEHOLDER NAME NA			
SUPPORT (Candidate or Measure)	OFFICEHOLDER	OFFICE SOUGHT (candidate) / OFFICE HELD (officeho	older)		
OPPOSE (Candidate or Measure)		BALLOT IDENTIFICATION / #	ELECTION D.	ATE Year	
	 	Props A,B,C	11/6/2018		
ASSIST (Officeholder)	MEASURE	DESCRIPTION Opposing props A,B,C to amend the city cl	harter		
15 CONTRIBUTION TOTALS	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED				
	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			\$ 527260.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED			\$ 0	
	4. TOTAL POLITICAL EXPENDITURES			\$ 1227970.28	
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTII	CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY	ſ	\$ 84043.36	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL DAY OF THE REPO	L AMOUNT OF ALL OUTSTANDING LOANS AS OF THE ORTING PERIOD	LAST	\$ 0	
16 AFFIDAVIT					
		I swear, or affirm, under penalty of is true and correct and includes all me under Title 15, Election Code.			
		* * * Electronically		k *	
AFFIX NOTARY STAMP / S	SEAL ABOVE	Signature of Campaigr	1 Treasurer		
Sworn to and subscribed before me, by the said <u>Gordon Hartman</u> . this the <u>29th</u> day					
	of October , 20 18 , to certify which, witness my hand and seal of office.				
Signature of officer administ	lering oath	Printed name of officer administering oath	Title o	f officer administering oath	

SUBTOTALS - SPAC

FORM SPAC COVER SHEET PG 3

17	COMMITTEE NAME 18 Filer ID (Ethics Co			mmission Filers)
	Secure	San Antonios Future		
19		JLE SUBTOTALS F SCHEDULE		SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 298760.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 25000.00
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0
4.	X	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGAN	NIZATION	\$ 203500.00
5.	X	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR ORGANIZATION	LABOR	\$ 0
6.	X	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZ	ATION	\$ 0
7.	X	SCHEDULE E: LOANS		\$ 0
8.	X	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 1227970.28
9.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0
10.	X	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTION	S	\$ 0
11.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0
12.	X	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	- C/OH	\$ 0
13.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTION	IS	\$ 0
14.	X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURN	ED TO FILER	\$ 0

SCHEDULE A1

	Т	The Instruction Guide explains how to cor	mplete this f	orm.	1 Total pages Schedule A1: 1 of 13
2	FILER NAME Secure San Ant	tonios Future			3 Filer ID (Ethics Commission Filers)
4	Date 9/28/2018	5 Full name of contributor ☐ or Abelardo Salinas	ut-of-state PA	C (ID#)	7 Amount of contribution (\$) 20.00
		6 Contributor address; 126 E Norwood Ct San Antonio, TX 78212	City; S	tate; Zip Code	
8	Principal occupa Engineer	ation / Job title (See instructions)		9 Employer (See instru LNV, Inc.	ctions)
	Date 9/29/2018	Full name of contributor	ut-of-state PA	C (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 236 Brightwood PI San Antonio, TX 78209	City; S	tate; Zip Code	
	Principal occupation / Job title (See instructions) Employer (See instructions) Professor Trinity University				
	Date 10/2/2018	Full name of contributor	ut-of-state PA	C (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 405 Wiltshire Ave San Antonio, TX 78209	City; S	tate; Zip Code	
	Principal occupa Real Estate	ation / Job title (See instructions)		Employer (See instru Embrey Partners	ctions)
	Date 10/2/2018	Full name of contributor	ut-of-state PA	C (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 1020 NE Loop 410 San Antonio, TX 78209	City; S	tate; Zip Code	
	Principal occupa	ation / Job title (See instructions)		Employer (See instru	ctions)
	Real Estate Dev	/eloper		Embrey Partners, Lt	d.

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SCHEDULE A1

	Т	he Instruction Guide explains how t	to complete this	form.	1 Total pages Schedule A1: 2 of 13
2	FILER NAME Secure San Ant	onios Future			3 Filer ID (Ethics Commission Filers)
4	Date 10/3/2018	5 Full name of contributor Darcie Schipull	out-of-state Pa	AC (ID#)	7 Amount of contribution (\$) 50.00
		6 Contributor address; 2506 Brookeglade San Antonio, TX 78232	City;	State; Zip Code	
8	Principal occupa Self employed	tion / Job title (See instructions)		9 Employer (See instru Self employed	uctions)
	Date 10/3/2018	Full name of contributor Nancy Kelley	out-of-state P	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 7 Links Green San Antonio, TX 78257	City;	State; Zip Code	
Principal occupation / Job title (See instructions) Self employed			Employer (See instructions) Self employed		
	Date 10/3/2018	Full name of contributor Eleanor Sprowl	out-of-state P	AC (ID#)	Amount of contribution (\$) 40.00
		Contributor address; 4218 Apple Tree Woods San Antonio, TX 78257	City;	State; Zip Code	
	Principal occupa Retired	tion / Job title (See instructions)		Employer (See instru Retired	uctions)
	Date 10/3/2018	Full name of contributor HB Zachry	out-of-state Pa	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 310 S Saint Mary St #2400 San Antonio, TX 78205	City;	State; Zip Code	
	Principal occupa Retired	tion / Job title (See instructions)		Employer (See instru Retired	uctions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 3 of 13
2	FILER NAME Secure San Ant	onios Future		3 Filer ID (Ethics Commission Filers)
4	Date 10/3/2018	5 Full name of contributor ☐ out-of-state PA William Stacy Locke	AC (ID#)	7 Amount of contribution (\$) 500.00
		6 Contributor address; City; S 601 Contour Dr San Antonio, TX 78212	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See instru Pioneer Energy	ctions)
	Date 10/3/2018	Full name of contributor	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 311 Third St #200 San Antonio, TX 78205	State; Zip Code	
Principal occupation / Job title (See instructions) Executive Director Employer (See instructions) San Antonio Book Festival				·
	Date 10/3/2018	Full name of contributor	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; City; S 114 Camp Street #301 San Antonio, TX 78204	State; Zip Code	
	Principal occupa Retired	tion / Job title (See instructions)	Employer (See instru Retired	ctions)
	Date 10/3/2018	Full name of contributor out-of-state PA Camacho Hernandez & Associates LLC	AC (ID#)	Amount of contribution (\$) 5000.00
		Contributor address; City; S 415 Embassy Oaks San Antonio, TX 78216	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See instru	ctions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete	this form.	1 Total pages Schedule A1: 4 of 13
2	FILER NAME Secure San Ant	onios Future		3 Filer ID (Ethics Commission Filers)
4	Date 10/3/2018	5 Full name of contributor	ate PAC (ID#)	7 Amount of contribution (\$) 10000.00
		6 Contributor address; City; 17890 Blanco Rd #401 San Antonio, TX 78232	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See instru	uctions)
	Date 10/3/2018	Full name of contributor	ate PAC (ID#)	Amount of contribution (\$) 10000.00
		Contributor address; City; 17890 Blanco #401 San Antonio, TX 78232	State; Zip Code	
Principal occupation / Job title (See instructions) Employer (See instructions)				
	Date 10/3/2018	Full name of contributor	ate PAC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; City; 111 Cibolo Ridge Trl Fair Oaks Ranch, TX 78015	State; Zip Code	
	Principal occupa Self Employed	tion / Job title (See instructions)	Employer (See instru Self Employed	uctions)
	Date 10/3/2018	Full name of contributor ut-of-sta	ate PAC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; City; 800 E Guenther San Antonio, TX 78210	State; Zip Code	
	Principal occupa Educator	tion / Job title (See instructions)	Employer (See instru The University of To	uctions) exas at San Antonio

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SCHEDULE A1

	т	he Instruction Guide explains how to	o complete this	form.	1 Total pages Schedule A1: 5 of 13
2	FILER NAME Secure San Ant	onios Future			3 Filer ID (Ethics Commission Filers)
4	Date 10/4/2018	5 Full name of contributor Danny Butler	ut-of-state PA	AC (ID#)	7 Amount of contribution (\$) 10000.00
		6 Contributor address; 1777 NE Loop 410 San Antonio, TX 78217	City; S	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)		9 Employer (See instru Jefferson Bank	ctions)
	Date 10/4/2018	Full name of contributor Bettyann Adams	Out-of-state PA	AC (ID#)	Amount of contribution (\$) 20.00
		Contributor address; 12735 Cranes MI San Antonio, TX 78230	City; S	State; Zip Code	
	Principal occupation / Job title (See instructions) Not Employed Employer (See instructions) Not Employed				
	Date 10/4/2018	Full name of contributor Nickey McCasland	out-of-state PA	AC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; 2423 Rim Oak San Antonio, TX 78232	City; S	State; Zip Code	
	Principal occupa Retired	tion / Job title (See instructions)		Employer (See instru Retired	ctions)
	Date 10/7/2018	Full name of contributor Jean Kolovson	☐ out-of-state PA	AC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; 323 Whisper Wood San Antonio, TX 78216	City; S	State; Zip Code	
	Principal occupa self-employed	tion / Job title (See instructions)		Employer (See instruaccountant	ctions)

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SCHEDULE A1

	т	he Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 6 of 13
2	FILER NAME Secure San Ant	onios Future			3 Filer ID (Ethics Commission Filers)
4	Date 10/10/2018	5 Full name of contributor Eric Scott	out-of-state Pa	AC (ID#)	7 Amount of contribution (\$) 20.00
		6 Contributor address; 13230 Trentwood San Antonio, TX 78231	City;	State; Zip Code	
8	Principal occupa Attorney	tion / Job title (See instructions)		9 Employer (See instru Oliver Law Firm	ictions)
	Date 10/11/2018	Full name of contributor Gunnar Johnson	out-of-state P	AC (ID#)	Amount of contribution (\$) 50.00
		Contributor address; 2215 Fawn Glen San Antonio, TX 78232	City;	State; Zip Code	
	Principal occupa Engineer	tion / Job title (See instructions)		Employer (See instru Zachry Federal Con	uctions) struction Corporation
	Date 10/11/2018	Full name of contributor Hong-Nhung Jarrett	out-of-state P	AC (ID#)	Amount of contribution (\$) 20.00
		Contributor address; 204 Post Oak Tr San Antonio, TX 78259	City;	State; Zip Code	
	Principal occupa Pharmacist	tion / Job title (See instructions)		Employer (See instru	ictions)
	Date 10/15/2018	Full name of contributor Wayne Alexander	out-of-state P	AC (ID#)	Amount of contribution (\$) 500.00
		Contributor address; 2 Lost Timbers San Antonio, TX 78248	City;	State; Zip Code	
	Principal occupa retired	tion / Job title (See instructions)		Employer (See instru	ictions)

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SCHEDULE A1

	т	he Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 7 of 13
2	FILER NAME Secure San Ant	onios Future		3 Filer ID (Ethics Commission Filers)
4	Date 10/15/2018	5 Full name of contributor ☐ out-of-state PA Consulting Engineers PAC	AC (ID#)	7 Amount of contribution (\$) 1000.00
		6 Contributor address; City; S 1001 Congress Ave #200 Austin, TX 78701	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See instru	ctions)
	Date 10/15/2018	Full name of contributor John Nikolatos Contributor address; 3738 Crossette	C (ID#)	Amount of contribution (\$) 20.00
		San Antonio, TX 78228		
	Principal occupa Self employed	tion / Job title (See instructions)	Employer (See instru Self employed	ctions)
	Date 10/15/2018	Full name of contributor	AC (ID#)	Amount of contribution (\$) 2500.00
		Contributor address; City; S 9607 Broadway #C San Antonio, TX 78217	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See instru	ctions)
	Date 10/15/2018	Full name of contributor Bracewell PAC Contributor address; 711 Louisiana St #2300 Houston, TX 77002	AC (ID#)	Amount of contribution (\$) 5000.00
	Principal occupa	tion / Job title (See instructions)	Employer (See instru	ctions)
		ATTACH ADDITIONAL COPIES O	OF THIS SCHEDULE AS A	NEEDED

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SCHEDULE A1

		The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 8 of 13
2	FILER NAME Secure San An	tonios Future		3 Filer ID (Ethics Commission Filers)
4	Date 10/15/2018	5 Full name of contributor ☐ out-of-state PA Charles Cheever Jr	C (ID#)	7 Amount of contribution (\$) 10000.00
8	Principal occup Chairman Eme	ation / Job title (See instructions) ritus	9 Employer (See instru Broadway Bank	ictions)
	Date 10/15/2018	Full name of contributor	C (ID#)	Amount of contribution (\$) 15000.00
		Contributor address; City; S 250 Nottingham #400 San Antonio, TX 78209	state; Zip Code	
	Principal occup Retired	ation / Job title (See instructions)	Employer (See instru Retired	actions)
	Date 10/17/2018	Full name of contributor		Amount of contribution (\$) 40000.00
	Principal occup	ation / Job title (See instructions)	Employer (See instru	actions)
	Date 10/17/2018	Full name of contributor	C (ID#) Ctate; Zip Code	Amount of contribution (\$) 100.00
	Principal occup	San Antonio, TX 78209 ation / Job title (See instructions)	Employer (See instru Retired	actions)

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SCHEDULE A1

	т	he Instruction Guide explains how	to complete this	form.	1 Total pages Schedule A1: 9 of 13
2	FILER NAME Secure San Ant	onios Future			3 Filer ID (Ethics Commission Filers)
4	Date 10/19/2018	5 Full name of contributor Mike Kaiman	☐ out-of-state P	AC (ID#)	7 Amount of contribution (\$) 100.00
		6 Contributor address; 727 Sentry HI San Antonio, TX 78260	City;	State; Zip Code	
8	Principal occupa Manager	tion / Job title (See instructions)		9 Employer (See instru Turner Construction	•
	Date 10/20/2018	Full name of contributor Jeanne Brown	out-of-state Pa	AC (ID#)	Amount of contribution (\$) 20.00
		Contributor address; 3030 Whisper Fern San Antonio, TX 78230	City;	State; Zip Code	
	Principal occupa Self employed	tion / Job title (See instructions)		Employer (See instru	uctions)
	Date 10/22/2018	Full name of contributor Walter Embrey	Out-of-state P	AC (ID#)	Amount of contribution (\$) 1000.00
		Contributor address; 1020 NE Loop 410 San Antonio, TX 78209	City;		
	Principal occupa	ntion / Job title (See instructions)		Employer (See instructions) Embrey Partners, Ltd.	
	Date 10/23/2018	Full name of contributor Gordon Hartman	out-of-state P	AC (ID#)	Amount of contribution (\$) 50000.00
		Contributor address; 1201 W Bitters #1200 San Antonio, TX 78216	City;	State; Zip Code	
	Principal occupa Exec Dir	tion / Job title (See instructions)		Employer (See instru Hartman Foundation	•

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SCHEDULE A1

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 10 of 13
2 FILER NAME Secure San Antonios Future	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor Out-of-state PAC (ID#) Jon McDowell	7 Amount of contribution (\$) 300.00
6 Contributor address; City; State; Zip Code 902 Campanile San Antonio, TX 78258	
8 Principal occupation / Job title (See instructions) Accountant 9 Employer (See instructions) BKD, LLP	ructions)
Date Full name of contributor Out-of-state PAC (ID#) 10/23/2018 Michael Lynd	Amount of contribution (\$) 20000.00
Contributor address; City; State; Zip Code 525 E Mandalay San Antonio, TX 78212	
Principal occupation / Job title (See instructions) CEO Employer (See instructions) Kairoi	ructions)
Date Full name of contributor out-of-state PAC (ID#) 10/23/2018 Emmett C Wells, Jr. Family Properties LTD	Amount of contribution (\$) 10000.00
Contributor address; City; State; Zip Code 112 E Pecan #830 San Antonio, TX 78205	•
Principal occupation / Job title (See instructions) Employer (See instructions)	ructions)
Date 10/23/2018 Full name of contributor JTM Consulting LLC Contributor address; City; State; Zip Code	Amount of contribution (\$) 5000.00
1 Buckingham Court San Antonio, TX 78257	
Principal occupation / Job title (See instructions) Employer (See inst	ructions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete this f	1 Total pages Schedule A1: 11 of 13	
2	FILER NAME Secure San Ant	onios Future		3 Filer ID (Ethics Commission Filers)
4	Date 10/23/2018	5 Full name of contributor ut-of-state PAG BJ McCombs	C (ID#)	7 Amount of contribution (\$) 5000.00
		6 Contributor address; City; Si PO Box 003 San Antonio, TX 78201	tate; Zip Code	
8	Principal occupa Owner	tion / Job title (See instructions)	9 Employer (See instruction McCombs Enterprise	
	Date 10/23/2018	Full name of contributor	C (ID#)	Amount of contribution (\$) 5000.00
		Contributor address; City; S PO Box 6886 San Antonio, TX 78209	tate; Zip Code	
	Principal occupa CEO	tion / Job title (See instructions)	Employer (See instruction Argo	ctions)
	Date 10/23/2018	Full name of contributor	C (ID#)	Amount of contribution (\$) 10000.00
		Contributor address; City; S PO Box 17428 Austin, TX 78760	tate; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See instruc	ctions)
	Date 10/23/2018	Full name of contributor out-of-state PAG Gray Street Management LLC Contributor address; City; Si PO Box 461406 San Antonio, TX 78246	c (ID#) tate; Zip Code	Amount of contribution (\$) 10000.00
	Principal occupa	tion / Job title (See instructions)	Employer (See instruc	ctions)

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SCHEDULE A1

	7	The Instruction Guide explains how to complet	e this form.	1 Total pages Schedule A1: 12 of 13
2	FILER NAME Secure San An	tonios Future		3 Filer ID (Ethics Commission Filers)
4	Date 10/23/2018	5 Full name of contributor ut-of-s	state PAC (ID#)	7 Amount of contribution (\$) 2500.00
		6 Contributor address; City PO Box 7500 Detroit, MI 48275	; State; Zip Code	
8	Principal occupa	ation / Job title (See instructions)	9 Employer (See instr	uctions)
	Date 10/23/2018	Full name of contributor	state PAC (ID#)	Amount of contribution (\$) 2500.00
		Contributor address; City 410 Elizabeth San Antonio, TX 78209	; State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instr Bank of San Anton	· · · · · · · · · · · · · · · · · · ·
	Date 10/24/2018	Full name of contributor	state PAC (ID#)	Amount of contribution (\$) 2500.00
		Contributor address; City PO Box 1338 San Antonio, TX 78295	; State; Zip Code	
	Principal occupa	ation / Job title (See instructions)	Employer (See instr Beldon Roofing	uctions)
	Date 10/26/2018	Full name of contributor ut-of-s	state PAC (ID#)	Amount of contribution (\$) 50000.00
		Contributor address; City 112 E Pecan San Antonio, TX 78205	; State; Zip Code	
	Principal occupa Owner	ation / Job title (See instructions)	Employer (See instr Weston Ventures	uctions)

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SCHEDULE A1

	Т	he Instruction Guide explains how to complete th	is form.	1 Total pages Schedule A1: 13 of 13
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Secure San Ant			
4	Date		PAC (ID#)	7 Amount of contribution (\$)
	10/26/2018	San Antonio Apartment Association		10000.00
		6 Contributor address; City; 7525 Babcock Rd San Antonio, TX 78249	State; Zip Code	
8	Principal occupa	tion / Job title (See instructions)	9 Employer (See instr	ructions)
	Date 10/27/2018	Full name of contributor ut-of-state	PAC (ID#)	Amount of contribution (\$) 100.00
		Contributor address; City; 4100 Jackson Ave #250 Austin, TX 78731	State; Zip Code	
	Principal occupa Self Employed	tion / Job title (See instructions)	Employer (See instr Self Employed	uctions)
	Date	Full name of contributor ut-of-state	PAC (ID#)	Amount of contribution (\$)
		Contributor address; City;	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See instr	ructions)
	Date	Full name of contributor	PAC (ID#)	Amount of contribution (\$)
		Contributor address; City;	State; Zip Code	
	Principal occupa	tion / Job title (See instructions)	Employer (See instr	uctions)
	ı	ATTACH ADDITIONAL COPIES f contributor is out-of-state PAC, please see instr		

Forms provided by Texas Ethics Commission

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 1 of 1
2 FILER NAME Secure San	Antonios Future		3 Filer ID (Ethics Commission Filers)
TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0
5 Date 10/22/2018 6 Full name of contributor out-of-state PAC (ID#) SABOR 7 Contributor address; City; State; Zip Code 9110 IH-10 San Antonio, TX 78230			8 Amount of Contribution \$ 25000.00 9 In-kind contribution description Mailers Check if travel outside of Texas, complete Schedule T
10 Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (F	FOR NON-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor	s job title (FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of	contributor's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID# Contributor address; City; State; Zip) O Code	Amount of Contribution \$ In-kind contribution description
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (F	Check if travel outside of Texas, complete Schedule TFOR NON-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor'	s job title (FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of	contributor's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
	ATTACH ADDITIONAL COPIES OF T	HIS SCHEDULE	E AS NEEDED

PLEDGED CONTRIBUTIONS

SCHEDULE **B**

	The Instruction Guide explains how to complete this for	m.	1 Total pages Schedule B: 1 of 1
2 FILER NAM Secure Sa	E n Antonios Future		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF	UNITEMIZED PLEDGES		\$ 0
5 Date	6 Full name of pledgor out-of-state PAC (ID 7 Pledgor address; City; State; Zip	#)	8 Amount of Pledge \$ 9 In-kind contribution description
10 Principal oc	cupation / Job title (See instructions)	11 Employer (Check if travel outside of Texas, complete Schedule T See instructions)
Date	Full name of pledgor out-of-state PAC (ID Pledgor address; City; State; Zip	#) Code	Amount of Pledge \$
			Check if travel outside of Texas, complete Schedule T
Principal oc	cupation / Job title (See instructions)	Employer (See instructions)
Date	Full name of pledgor out-of-state PAC (ID	#) Code	Amount of Pledge \$ In-kind contribution description
Principal oc	cupation / Job title (See instructions)	Employer (Check if travel outside of Texas, complete Schedule T See instructions)
Date	Full name of pledgor out-of-state PAC (ID Pledgor address; City; State; Zip	#)	Amount of Pledge \$ In-kind contribution description
Principal oc	cupation / Job title (See instructions)	Employer (Check if travel outside of Texas, complete Schedule T See instructions)
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDUL	E AS NEEDED
	If contributor is out-of-state PAC, please see instruction	n guide for additio	nal reporting requirements

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

	The Instruction Guide explains how to complete this form.	1 Total pages Schedule C1: 1 of 3
FILER NAI Secure Sa	ME n Antonios Future	3 Filer ID (Ethics Commission Filers
4 Date 10/3/2018	5 Corporation / Labor Organization name CobbFendley 6 Corporation / Labor Organization address; City; State; Zip Code 13430 Northwest Freeway #1100 Houston, TX 77040	7 Amount of contribution (\$) 2000.00
Date 10/3/2018	Corporation / Labor Organization name Arias & Associates	Amount of contribution (\$) 1000.00
Date 10/3/2018	Corporation / Labor Organization name Zachry Corporation Corporation / Labor Organization address; City; State; Zip Code PO Box 33240 San Antonio, TX 78248	Amount of contribution (\$) 5000.00
Date 10/3/2018	Corporation / Labor Organization name Zachry Corporation Corporation / Labor Organization address; City; State; Zip Code PO Box 33240 San Antonio, TX 78248	Amount of contribution (\$) 50000.00
Date 10/3/2018	Corporation / Labor Organization name Bank of San Antonio Corporation / Labor Organization address; City; State; Zip Code 1900 NW Loop 410 San Antonio, TX 78213	Amount of contribution (\$) 25000.00

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

	The Instruction Guide explains how to complete this form.	1 Total pages Schedule C1: 2 of 3
FILER NAM	ΛΕ n Antonios Future	3 Filer ID (Ethics Commission Filers
Date 0/5/2018	5 Corporation / Labor Organization name Terracon	7 Amount of contribution (\$) 1000.00
Date 0/15/2018	Corporation / Labor Organization name Frost Bank Corporation / Labor Organization address; City; State; Zip Code 100 W Houston San Antonio, TX 78205	Amount of contribution (\$) 50000.00
Date 10/15/2018	Corporation / Labor Organization name K Friese & Associates Inc	Amount of contribution (\$) 500.00
Date 10/15/2018	Corporation / Labor Organization name Pape Dawson Engineers	Amount of contribution (\$) 25000.00
Date 10/15/2018	Corporation / Labor Organization name LAN Inc	Amount of contribution (\$) 2000.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

	The Instruction Guide explains how to complete this form.	1 Total pages Schedule C1: 3 of 3
2 FILER NAM Secure Sar	ΛΕ n Antonios Future	3 Filer ID (Ethics Commission Filers
4 Date 10/23/2018	 5 Corporation / Labor Organization name Frost Bank 6 Corporation / Labor Organization address; City; State; Zip Code 100 W Houston San Antonio, TX 78205 	7 Amount of contribution (\$) 20000.00
Date 10/23/2018	Corporation / Labor Organization name HDR Inc	Amount of contribution (\$) 2500.00
Date 10/23/2018	Corporation / Labor Organization name ACEC Texas Corporation / Labor Organization address; City; State; Zip Code 1001 Congress Ave #200 Austin, TX 78701	Amount of contribution (\$) 2500.00
Date 10/23/2018	Corporation / Labor Organization name Frontier Enterprises Inc	Amount of contribution (\$) 15000.00
Date 10/26/2018	Corporation / Labor Organization name CDS Muery	Amount of contribution (\$) 2000.00

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C2

	The Instruction Guide explains how to complete this form.		1	Total pages Schedule C2:	
2	2 FILER NAME			3	Filer ID (Ethics Commission Filers)
	Secure San Antonios Future				(
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)
		6	Corporation / Labor Organization address; City; State; Zip Code	8	In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
		•	Corporation / Labor Organization address; City; State; Zip Code		In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
		•	Corporation / Labor Organization address; City; State; Zip Code		In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
			Corporation / Labor Organization address; City; State; Zip Code		In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
		•	Corporation / Labor Organization address; City; State; Zip Code		In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
			ATTACH ADDITIONAL COPIES OF THIS SCHEDUL	EΑ	AS NEEDED

PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE D

	The Instruction Guide explains how to complete this form.			1	Total pages Schedule D: 1 of 1
2	2 FILER NAME			3	Filer ID (Ethics Commission Filers)
	Secure San	An	tonios Future		
4	Date	5	Corporation / Labor Organization name	7	Amount of contribution (\$)
		6	Corporation / Labor Organization address; City; State; Zip Code	8	In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
		•	Corporation / Labor Organization address; City; State; Zip Code	•	In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
		•	Corporation / Labor Organization address; City; State; Zip Code		In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
		•	Corporation / Labor Organization address; City; State; Zip Code		In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
	Date		Corporation / Labor Organization name		Amount of contribution (\$)
		•	Corporation / Labor Organization address; City; State; Zip Code	•	In-kind contribution description
					Check if travel outside of Texas, complete Schedule T
			ATTACH ADDITIONAL COPIES OF THIS SCHEDUL	ΕA	AS NEEDED

LOANS SCHEDULE E Total pages Schedule E: The Instruction Guide explains how to complete this form. 1 of 1 2 FILER NAME 3 Filer ID (Ethics Commission Filers) **Secure San Antonios Future** 4 TOTAL OF UNITEMIZED LOANS **\$** 0 5 Date of loan 7 Name of lender out-of-state PAC (ID#_ 9 Loan Amount (\$) 6 Is lender a 8 Lender address; City; State; Zip Code 10 Interest rate financial institution? 11 Maturity date **12** Principal occupation / Job title (See instructions) 13 Employer (See instructions) 14 Description of Collateral 15 Check if personal funds were deposited into political account (See instructions) none **16** GUARANTOR 17 Name of guarantor 19 Amount Guaranteed (\$) **INFORMATION** 18 Guarantor address; City; State; Zip Code not applicable 20 Principal occupation (See instructions) 21 Employer (See instructions) Date of loan Name of lender out-of-state PAC (ID#_ Loan Amount (\$) Is lender a Lender address; State; Zip Code Interest rate financial institution? Maturity date Principal occupation / Job title (See instructions) Employer (See instructions) **Description of Collateral** Check if personal funds were deposited into political account (See Instructions) __ none **GUARANTOR** Amount Guaranteed (\$) Name of guarantor **INFORMATION** City; State: Guarantor address; Zip Code Principal occupation (See instructions) Employer (See instructions) ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Accounting/Banking Event Expense Solicitation/Fundraising Expense Advertising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/Donations Made By Gifts/Awards/Memorials Expense Printing Expense Travel Out Of District Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Other (enter a category not listed above) Legal Services Credit Card Payment The Instruction Guide explains how to complete this form 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission Filers) 2 FILER NAME 1 of 83 **Secure San Antonios Future** 4 Date 5 Payee name 10/1/2018 **Archer Group** 6 Amount (\$) 7 Payee address: City; Zip Code State; 15000.00 300 Convent #2500 San Antonio, TX 78205 (a) Category (See categories listed at the top of this schedule) 8 (b) Description Campaign consulting **Consulting Expense PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/1/2018 Ashley Barth Payee address; Amount (\$) City; State; Zip Code 7000.00 300 Convent #2500 San Antonio, TX 78205 Category (See categories listed at the top of this schedule) Description Finance consulting **Consulting Expense PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/1/2018 Jeffs Journeys LLC Amount (\$) Pavee address: State: Zip Code City; 1550.00 14 Stonewall Bend San Antonio, TX 78256 Category (See categories listed at the top of this schedule) Description Social media **Advertising Expense PURPOSE** OF **EXPENDITURE** Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate / Officeholder name Office held Office sought expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 2 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/1/2018	5 Payee name Daniele Jensen		
6 Amount (\$) 5000.00	7 Payee address; City; State; 300 Convent #2500 San Antonio, TX 78205	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	(b) Description Payroll	
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held
Date 10/1/2018	Payee name Lone Star Media		
Amount (\$) 877.47	Payee address; City; State; 1011 N Frio San Antonio, TX 78207	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Advertising Expense	T-shirts Check if travel out	tside of Texas, complete schedule T
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Check if Austin, T	X, officeholder living expense Office held
Date 10/1/2018	Payee name Paya Inc		
Amount (\$) 1233.92	Payee address; City; State; 12120 Sunset Hills Rd #500 Reston, VA 20190	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Fees	Credit card fees Check if travel out	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THI	IS SCHEDULE AS NEED!	E D

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 3 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/1/2018	5 Payee name Prestige Printing		
6 Amount (\$) 1959.33	7 Payee address; City; State; 8 Burwood Ln San Antonio, TX 78212	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Printing Expense	(b) Description Door hangers	
EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/1/2018	Payee name Prestige Printing		
Amount (\$) 3166.31	Payee address; City; State; 8 Burwood Ln San Antonio, TX 78212	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Printing Expense	Brochures	side of Texas, complete schedule T
		Check if Austin, T.	X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held
Date 10/1/2018	Payee name Prestige Printing		
Amount (\$) 5700.00	Payee address; City; State; 8 Burwood Ln San Antonio, TX 78212	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Advertising Expense	Signs Check if travel out	iside of Texas, complete schedule T
Complete ONLY if direct expenditure to benefit C/C		Office sought	X, officeholder living expense Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 4 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/1/2018	5 Payee name Third Coast Consultants		
6 Amount (\$) 5000.00	7 Payee address; City; State; PO Box 261 Eustace, TX 75124	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Consulting Expense	Research Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/1/2018	Payee name Edward Shack		
Amount (\$) 225.00	Payee address; City; State; 4410 Bellvue Austin, TX 78756	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Legal Services	Legal fee Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/1/2018	Payee name Alamo Technology Rentals		
Amount (\$) 1000.00	Payee address; City; State; 616 Rhapsody San Antonio, TX 78216	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Event Expense	A/V System Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDI	ED

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 5 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/1/2018	5 Payee name Tony Gs Soul Food			
6 Amount (\$) 3464.80	7 Payee address; City; State; Zip Code 915 S Hackberry San Antonio, TX 78201			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Event Expense	Catering & Shutt	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/1/2018	Payee name Cassandra Littlejohn			
Amount (\$) 3125.00	Payee address; City; State; 300 Convents #2500 San Antonio, TX 78205	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Payroll Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/1/2018	Payee name Tech Bloc			
Amount (\$) 10000.00	Payee address; City; State; 110 E Houston San Antonio, TX 78205	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Event Expense	Room rental & c	atering Save Our City Rally tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THI	S SCHEDULE AS NEED	ED	

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 6 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/1/2018	5 Payee name CSG Inc		
6 Amount (\$) 5000.00	7 Payee address; City; State; 715 S St Marys San Antonio, TX 78205	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Consulting Expense	Campaign consu	tside of Texas, complete schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/2/2018	Payee name Corner Store		
Amount (\$) 29.96	Payee address; City; State; 2001 Broadway San Antonio, TX 78212	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Transportation Equipment & Related Expense	Fuel Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/2/2018	Payee name Wal-Mart		
Amount (\$) 94.15	Payee address; City; State; 3302 SE Military San Antonio, TX 78223	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
7 of 83	Secure San Antonios Future		Frier ID (Ethics Commission Fliers)	
4 Date 10/2/2018	5 Payee name Duable Brand Trust			
6 Amount (\$) 21320.00	7 Payee address; City; State; Zip Code 1422 E Grayson #3rd San Antonio, TX 78202			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Consulting Expense	Communications Check if travel ou	tside of Texas, complete schedule T	
9 Complete ONLY if direct expenditure to benefit C/OH Check if Austin, TX, officeholder living expense Office sought Office held				
Date 10/2/2018	Payee name Duable Brand Trust			
Amount (\$) 3356.25	Payee address; City; State; 1422 E Grayson #3rd San Antonio, TX 78202	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheol Advertising Expense	Online ads Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held	
Date 10/3/2018	Payee name Sign Busters			
Amount (\$) 12725.50	Payee address; City; State; PO Box 241018 San Antonio, TX 78224	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheen Advertising Expense	Sign installation Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/O		Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEEDI	E D	

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 8 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/2018	5 Payee name Angela Anthony		
6 Amount (\$) 186.00	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name Savanna Campos		
Amount (\$) 270.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name LeReta Gatlin-McDavid		
Amount (\$) 381.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDI	ED

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 9 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/2018	5 Payee name Alice Gil		
6 Amount (\$) 294.00	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name Ethel Johnson		
Amount (\$) 318.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name LaKesha Jones		
Amount (\$) 150.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDI	ED

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 10 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/2018	5 Payee name Saul Martinez		
6 Amount (\$) 120.00	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services	
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name Tamer Morsi		
Amount (\$) 127.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T
		Check if Austin, T	X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name Sharon Sorrell		
Amount (\$) 294.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 11 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/2018	5 Payee name Hortense Smith		
6 Amount (\$) 438.00	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name Best Buy		
Amount (\$) 600.00	Payee address; City; State; 125 NW Loop 410 San Antonio, TX 78216	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name San Antonio Central Library		
Amount (\$) 500.00	Payee address; City; State; 600 Soledad San Antonio, TX 78205	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Event Expense	Room rental Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDI	E D

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)	
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)
1 Total pages Schedule F1: 12 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
4 Date 10/3/2018	5 Payee name Move Busters		
6 Amount (\$) 450.00	7 Payee address; City; State; PO Box 241018 San Antonio, TX 78224	Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office equipmen Check if travel ou	t moving tside of Texas, complete schedule T X, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name Sohphia Gilmour		
Amount (\$) 2663.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date 10/3/2018	Payee name David Vidaurri		
Amount (\$) 336.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEEDI	ED

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 13 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/3/2018	5 Payee name Chris Hernandez				
6 Amount (\$) 6400.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/3/2018	Payee name Alex Perkowski				
Amount (\$) 2005.54	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/3/2018	Payee name Raylyn Bernal				
Amount (\$) 314.00	\$) Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 14 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/3/2018	5 Payee name Briana Campos				
6 Amount (\$) 351.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services			
EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/3/2018	Payee name Clarissa Charles				
Amount (\$) 120.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	side of Texas, complete schedule T		
		Check if Austin, T	X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
Date 10/3/2018	Payee name Jamal Mosley				
Amount (\$) 255.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel out	iside of Texas, complete schedule T		
	Complete ONLY if direct expenditure to benefit C/OH Check if Austin, TX, officeholder living expense Office sought Office held				
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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 15 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/3/2018	5 Payee name Jamie Rosas				
6 Amount (\$) 300.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/3/2018	Payee name Haley Ticas				
Amount (\$) 120.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/3/2018	Payee name Katherine Warner				
Amount (\$) 120.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 16 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/3/2018	5 Payee name Kacey Diaz				
6 Amount (\$) 127.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/3/2018	Payee name Derek Dimas				
Amount (\$) 300.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T		
			X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/3/2018	Payee name Lamarr Gusman				
Amount (\$) 321.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T		
			X, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Cineck if Adstin, 1X, officeholder living expense Office sought Office held				
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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 17 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/4/2018	5 Payee name The Campaign Workshop				
6 Amount (\$) 75000.00	7 Payee address; City; State; Zip Code 1660 L St NW Washington, DC 20036				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Advertising Expense	Digital ads Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/5/2018	Payee name Enterprise Rent A Car				
Amount (\$) 3275.92	Payee address; City; State; Zip Code 808 S St Marys San Antonio, TX 78205				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Transportation Equipment & Related Expense	Field team van Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/5/2018	Payee name Wal-Mart				
Amount (\$) 29.62	Payee address; City; State; Zip Code 3302 SE Military San Antonio, TX 78223				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 18 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/8/2018	5 Payee name CSG Inc			
6 Amount (\$) 106250.00	7 Payee address; City; State; Zip Code 715 S St. Marys San Antonio , TX 78205			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Advertising Expense	Mail program Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/9/2018	Payee name Wal-Mart			
Amount (\$) 42.78	Payee address; City; State; 3302 SE Military San Antonio, TX 78223	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/9/2018	Payee name Corner Store			
Amount (\$) 24.82	Payee address; City; State; 2001 Broadway San Antonio, TX 78212	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Transportation Equipment & Related Expense	Fuel Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED	

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 19 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/9/2018	5 Payee name El Milagrito			
6 Amount (\$) 200.00	7 Payee address; City; State; Zip Code 521 E Woodlawn San Antonio, TX 78212			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Food/Beverage Expense	Blockwalker brea	akfast tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/9/2018	Payee name CVS			
Amount (\$) 27.01	Payee address; City; State; 4600 Broadway San Antonio, TX 48409	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/9/2018	Payee name AT&T			
Amount (\$) 392.08	Payee address; City; State; 7400 San Pedro San Antonio, TX 78216	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Phones Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED .	

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense I Fees (Food/Beverage Expense I Gifts/Awards/Memorials Expense I	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 20 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/9/2018	5 Payee name NGP			
6 Amount (\$) 255.00	7 Payee address; City; State; Zip Code 1445 New York Ave NW Washington, DC 20005			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Office Overhead/Rental Expense	(b) Description Database storage	9	
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Sebastian Mencia			
Amount (\$) 90.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Reina Rojas			
Amount (\$) 97.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 21 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Alex Perkowski			
6 Amount (\$) 933.33	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schere Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Rita Lewis			
Amount (\$) 361.90	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schee Other: Payroll Candidate / Officeholder name	Field services Check if travel ou Check if Austin, T	tside of Texas, complete schedule T X, office hold	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Angela Salazar			
Amount (\$) 90.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheen Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 22 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Dustin Specht			
6 Amount (\$) 100.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Sophie Gillmour			
Amount (\$) 583.33	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
-			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/10/2018	Payee name Jamal Mosley			
Amount (\$) 120.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	teide of Tours assessed to sale dule T	
			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 23 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Evan Eisenberg			
6 Amount (\$) 135.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct candidate / Officeholder name office sought office held expenditure to benefit C/OH				
Date 10/10/2018	Payee name Iraida Galindo			
Amount (\$) 132.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE Complete ONLY if direct	Category (See categories listed at the top of this sched Other: Payroll Candidate / Officeholder name	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense Office held	
expenditure to benefit C/0				
Date 10/10/2018	Payee name Sinah Galindo			
Amount (\$) Payee address; City; State; Zip Code 132.00 1001 Broadway San Antonio, TX 78215				
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Field services		
EXPENDITURE		Check if Austin, T	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/0		Office sought	Office held	
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 24 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Robert Gomez			
6 Amount (\$) 81.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Theresa Hernandez			
Amount (\$) 105.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought	Office held	
Date 10/10/2018	Payee name Carla Huitar			
Amount (\$) 180.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 25 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Travis Boyd			
6 Amount (\$) 90.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Esther Bravo			
Amount (\$) 105.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Rebecca Campa			
Amount (\$) 105.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 26 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/10/2018	5 Payee name Jennifer Duquette				
6 Amount (\$) 18.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Sloan Martin				
Amount (\$) 500.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Chris Hernandez				
Amount (\$) 1446.40	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 27 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/10/2018	5 Payee name David Vidaurri				
6 Amount (\$) 389.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Laura Villalobos				
Amount (\$) 397.50	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Angela Anthony				
Amount (\$) 255.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense I Fees (Food/Beverage Expense I Gifts/Awards/Memorials Expense I	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 28 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Joy Blake			
6 Amount (\$) 354.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
Date 10/10/2018	Payee name Effie Boston			
Amount (\$) 75.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/10/2018	Payee name Sage Media			
Amount (\$) 350000.00	Payee address; City; State; 1322 G St SE Washington, DC 20003	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Advertising Expense	Description TV ads		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 29 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/10/2018	5 Payee name Sandra Gonzales				
6 Amount (\$) 412.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name LeReta Gatlin-McDavid				
Amount (\$) 669.75	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Alice Gil				
Amount (\$) 258.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 30 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Evette Falcon			
6 Amount (\$) 52.50	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
Date 10/10/2018	Payee name Savanna Campos			
Amount (\$) 341.25	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	side of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought	Office held	
Date 10/10/2018	Payee name Yara Chavarria			
Amount (\$) 143.90	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	side of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking	•	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense	
Advertising Expense Consulting Expense		Office Overhead/Rental Expense Polling Expense	Transportation Equipment & Related Expense Travel in District	
Contributions/Donations Made By		Printing Expense	Travel Out Of District	
Candidate/Officeholder/Political C		Salaries/Wages/Contract Labor	Other (enter a category not listed above)	
Credit Card Payment	The Instruction Guide explains how to	o complete this form		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
31 of 83	Secure San Antonios Future			
4 Date 10/10/2018	5 Payee name Brianna Campos			
6 Amount (\$)	7 Payee address; City; State;	Zip Code		
348.25	1001 Broadway			
	San Antonio, TX 78215			
8	(a) Category (See categories listed at the top of this sched	dule) (b) Description		
PURPOSE	Other: Payroll	Field services		
OF				
EXPENDITURE		Check if travel ou	tside of Texas, complete schedule T	
		Check if Austin, T	X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Data	D			
Date 10/10/2018	Payee name Michelle Daniels			
Amount (\$)	Payee address; City; State;	Zip Code		
539.00	1001 Broadway			
	San Antonio, TX 78215			
	Category (See categories listed at the top of this sched	dule) Description		
PURPOSE	Other: Payroll	Field services		
OF				
EXPENDITURE		Check if travel out	tside of Texas, complete schedule T	
			·	
Complete ONLY if direct	Candidate / Officeholder name	Office sought	X, officeholder living expense Office held	
expenditure to benefit C/OH				
Date	Payee name			
10/10/2018	Michelle de Uriarte			
Amount (\$)	Payee address; City; State;	Zip Code		
190.75	1001 Broadway			
	San Antonio, TX 78215			
	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
PURPOSE	Other. Payron	l leid sei vices		
OF				
EXPENDITURE		Check if travel out	tside of Texas, complete schedule T	
		Check if Austin, T	X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 32 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Anthony Vasquez			
6 Amount (\$) 180.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
Date 10/10/2018	Payee name Sharon Sorrell			
Amount (\$) 324.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/10/2018	Payee name Hortense Smith			
Amount (\$) 324.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/10/2018	5 Payee name Tamer Morsi				
6 Amount (\$) 456.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Zachary Rouah				
Amount (\$) 367.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Stella Salas				
Amount (\$) 18.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 34 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/10/2018	5 Payee name David Sanchez				
6 Amount (\$) 90.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/10/2018	Payee name Tambra Satterfield				
Amount (\$) 352.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought	Office held		
Date 10/10/2018	Payee name Ashley Moberg				
Amount (\$) 156.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct				
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense I Fees (Food/Beverage Expense I Gifts/Awards/Memorials Expense I	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 35 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Rick Knoch			
6 Amount (\$) 84.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name LaKesha Jones			
Amount (\$) 364.25	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Rose Jones			
Amount (\$) 48.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 36 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/10/2018	5 Payee name Lucille Knoch			
6 Amount (\$) 84.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
Date 10/10/2018	Payee name Kayleigh Johnson			
Amount (\$) 90.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services		
ZAI ZIIZII GIKZ			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/10/2018	Payee name Ethel Johnson			
Amount (\$) 240.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
		Check if Austin, T	X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 37 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/11/2018	5 Payee name Gospel 1480 AM				
6 Amount (\$) 120.00	7 Payee address; City; State; Zip Code 1211 Hein Rd San Antonio, TX 78220				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Advertising Expense	Radio ads Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/12/2018	Payee name The San Antonio Herald				
Amount (\$) 1500.00	Payee address; City; State; Zip Code 301 Ave E San Antonio, TX 78205				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Advertising Expense	Newspaper ads Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/15/2018	Payee name Tony Gs Soul Food				
Amount (\$) 5000.00	Payee address; City; State; Zip Code 915 S Hackberry San Antonio, TX 78201				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Event Expense	Eastside event c	atering tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 38 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/15/2018	5 Payee name JSP AV			
6 Amount (\$) 1186.80	7 Payee address; City; State; Zip Code 7456 Reindeer Trail San Antonio, TX 78238			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Event Expense	Event A/V Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/15/2018	Payee name Wal-Mart			
Amount (\$) 130.03	Payee address; City; State; Zip Code 3302 SE Military San Antonio, TX 78223			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/15/2018	Payee name El Milagrito			
Amount (\$) 100.00	Payee address; City; State; Zip Code 521 E Woodlawn San Antonio, TX 78212			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Food/Beverage Expense	Blockwalker brea	akfast tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 39 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/15/2018	5 Payee name Prestige Printing			
6 Amount (\$) 1962.57	7 Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78212			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Printing Expense	(b) Description Pamphlets		
EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 10/16/2018	Payee name Sign Busters			
Amount (\$) 12745.45	Payee address; City; State; Zip Code PO Box 241018 San Antonio, TX 78224			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Advertising Expense	Sign installation	side of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/16/2018	Payee name Corner Store			
Amount (\$) 40.34	Payee address; City; State; 2001 Broadway San Antonio, TX 78212	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Transportation Equipment & Related Expense	Fuel Check if travel out	side of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 40 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/16/2018	5 Payee name Bank of San Antonio			
6 Amount (\$) 22.00	7 Payee address; City; State; Zip Code 1900 NW Loop 410 San Antonio, TX 78213			
8 PURPOSE	(a) Category (See categories listed at the top of this sched	(b) Description Bank fee		
OF EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/16/2018	Payee name CSG Inc			
Amount (\$) 131250.00				
PURPOSE OF	Category (See categories listed at the top of this sched Advertising Expense	Description Mail program		
EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/16/2018	Payee name The Campaign Workshop			
Amount (\$) 50000.00	Payee address; City; State; 1660 L St NW Washington, DC 20036	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Advertising Expense	Description Digital ads		
EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 41 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/16/2018	5 Payee name Brett James Rivera				
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 2905 Beanna St Austin, TX 78705				
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Event Expense	(b) Description Event A/V			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Avista Products				
Amount (\$) 5000.00	Payee address; City; State; Zip Code 3363 E Commerce #116 San Antonio, TX 78217				
PURPOSE OF	Category (See categories listed at the top of this scheen Advertising Expense	Description D2 Town Hall Pro	omotion		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Publishing Company				
Amount (\$) 1500.00	Payee address; City; State; PO Box 200226 San Antonio, TX 78220	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this scheen Advertising Expense	Description Online ads			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 42 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/17/2018	5 Payee name SNAP News				
6 Amount (\$) 1500.00	7 Payee address; City; State; Zip Code 7303 Justino Trail San Antonio, TX 78224				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Advertising Expense	Newspaper ads Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name San Antonio Community Radio				
Amount (\$) 1000.00	Payee address; City; State; Zip Code 8100 Roughrider #202 San Antonio, TX 78239				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Advertising Expense	Radio ads Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name KCHL Radio				
Amount (\$) 315.00					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Advertising Expense	Radio ads Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 43 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Reina Rojas			
6 Amount (\$) 176.25	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Sloan Martin			
Amount (\$) 583.33	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other:	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Carson Bolding			
Amount (\$) 90.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 44 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/17/2018	5 Payee name Cameron Lilley				
6 Amount (\$) 216.50	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Sohphia Gilmour				
Amount (\$) 583.33	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other:	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Sebastian Mencia				
Amount (\$) 78.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 45 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/17/2018	5 Payee name Alex Perkowski				
6 Amount (\$) 933.33	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other:	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held					
Date 10/17/2018	Payee name Laura Villalobos				
Amount (\$) 544.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Chasity Villarreal				
Amount (\$) 313.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 46 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Chris Hernandez			
6 Amount (\$) 1400.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other:	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Kacey Diaz			
Amount (\$) 97.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Jennifer Duquette			
Amount (\$) 198.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Evan Eisenberg			
6 Amount (\$) 85.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Rita Lewis			
Amount (\$) 264.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Wal-Mart			
Amount (\$) 33.93	Payee address; City; State; 3302 SE Military San Antonio, TX 78223	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense I Fees (Food/Beverage Expense I Gifts/Awards/Memorials Expense I	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 48 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/17/2018	5 Payee name Best Buy				
6 Amount (\$) 164.25	7 Payee address; City; State; Zip Code 125 NW Loop 410 San Antonio, TX 78216				
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Office Overhead/Rental Expense	(b) Description Office supplies			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Effie Boston				
Amount (\$) 256.92	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought	Office held		
Date 10/17/2018	Payee name Angela Anthony				
Amount (\$) 252.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct				
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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 49 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Deluxe Check Company			
6 Amount (\$) 215.33	7 Payee address; City; State; Zip Code 3680 Victoria St. North Shoreview, MN 55126			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Office Overhead/Rental Expense	Checks Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Savanna Campos			
Amount (\$) 187.50				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Yara Chavarria			
Amount (\$) 261.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/0		Office sought	Office held	
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	EXPENDITURE CATEGORIES	S FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 50 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Michelle Daniels			
6 Amount (\$) 127.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Joy Blake			
Amount (\$) 517.92	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Brianna Campos			
Amount (\$) 247.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees (Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 51 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Evette Falcon			
6 Amount (\$) 157.50	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name LeReta Gatlin-McDavid			
Amount (\$) 440.50				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched	Field services Check if travel ou Check if Austin, T	tside of Texas, complete schedule T X, officeholder living expense Office held	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office rield	
Date 10/17/2018	Payee name Caroline Decherd			
Amount (\$) Payee address; City; State; Zip Code 441.50 1001 Broadway San Antonio, TX 78215				
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/0		Office sought	Office held	
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 52 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Michelle de Uriarte			
6 Amount (\$) 537.15	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Alice Gil			
Amount (\$) 300.00	(\$) Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Sandra Gonzales			
Amount (\$) 375.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 53 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Kayleigh Johnson			
6 Amount (\$) 187.50	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Ethel Johnson			
Amount (\$) 348.00				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
-			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/17/2018	Payee name Demone Johnson			
Amount (\$) 203.90	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
		Check if Austin, T	X, officeholder living expense	
	Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 54 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Rose Jones			
6 Amount (\$) 119.50	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name LaKesha Jones			
Amount (\$) 358.85	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Lucille Knoch			
Amount (\$) 381.65				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 55 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/17/2018	5 Payee name Alan Medrano				
6 Amount (\$) 305.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Rick Knoch				
Amount (\$) 363.40	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Ashley Moberg				
Amount (\$) 261.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 56 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/17/2018	5 Payee name Tamer Morsi				
6 Amount (\$) 360.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Teresa Medrano				
Amount (\$) 147.96	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/17/2018	Payee name Isaac Melendez				
Amount (\$) 75.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 57 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name Tambra Satterfield			
6 Amount (\$) 480.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Jon Servantez			
Amount (\$) 80.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	teide of Tours assessed to selective T	
-			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/17/2018	Payee name Saul Martinez			
Amount (\$) 90.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	FOR BOX 8(a)	
Accounting/Banking		Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Advertising Expense		Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense		Travel in District	
Contributions/Donations Made By		Polling Expense Printing Expense	Travel Out Of District
Candidate/Officeholder/Political C	·	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how t	_	cule (enter a sategory not noted above)
	·	o complete this form	T
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
58 of 83	Secure San Antonios Future		
4 D-4-	5 D		
4 Date	5 Payee name		
10/17/2018	Stella Salas		
6 Amount (\$)	7 Payee address; City; State;	Zip Code	
314.25	, , , , , , , , , , , , , , , , , , , ,	Zip Gode	
314.23	1001 Broadway		
	San Antonio, TX 78215		
8	(a) Category (See categories listed at the top of this sche		
PURPOSE	Other: Payroll	Field services	
OF			
EXPENDITURE		Check if travel ou	tside of Texas, complete schedule T
		Check if Austin T	X, officeholder living expense
9 Complete ONLY if direct		Office sought	Office held
expenditure to benefit C/0	OH .		
Date	Payee name		
10/17/2018	Violet Polk		
A 1 (0)	D 11 011	7' 0 1	
Amount (\$) Payee address; City; State; Zip Code			
176.95 1001 Broadway			
	San Antonio, TX 78215		
	·		
	Category (See categories listed at the top of this sche	dule) Description	
	Other: Payroll	Field services	
PURPOSE	outon ruyron	1.0.0.000	
OF		<u> </u>	
EXPENDITURE		Check if travel ou	tside of Texas, complete schedule T
			, ,
		Check if Austin, I	X, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/0	OH .		
	T		
Date	Payee name		
10/17/2018	Shawn Mothershed		
A (A)	Davida adda a constituit di co	7:- 0-1-	
Amount (\$)	Payee address; City; State;	Zip Code	
164.00	1001 Broadway		
	San Antonio, TX 78215		
	Category (See categories listed at the top of this sche	dule) Description	
DUDDOOF	Other: Payroll	Field services	
PURPOSE	,		
OF			
EXPENDITURE		Check if travel ou	tside of Texas, complete schedule T
			•
		Check if Austin, T	X, officeholder living expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought	Office held
expenditure to benefit C/0		-	
	ATTAOLI ABBITIONIA GODING CO	10 00HEDIN = 10 HE===	
	ATTACH ADDITIONAL COPIES OF TH	IS SCHEDULE AS NEED!	EU

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 59 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name David Sanchez			
6 Amount (\$) 201.50	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Sharon Sorrell			
Amount (\$) 390.00	·			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought	Office held	
Date 10/17/2018	Payee name Anthony Vasquez			
Amount (\$) 327.45	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 60 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/17/2018	5 Payee name David Vidaurri			
6 Amount (\$) 191.95	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/17/2018	Payee name Hortense Smith			
Amount (\$) 288.00	(\$) Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought	Office held	
Date 10/17/2018	Payee name Clement Teddy			
Amount (\$) 341.25	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 61 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/18/2018	5 Payee name Jasons Deli			
6 Amount (\$) 147.46	7 Payee address; City; State; Zip Code 25 NE Loop 410 San Antonio, TX 78216			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Food/Beverage Expense	Volunteer event of Check if travel ou	catering tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 10/18/2018	Payee name Texas Star Documents			
Amount (\$) 1071.68	Payee address; City; State; Zip Code 300 Convent #1002 San Antonio, TX 78205			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Advertising Expense	Display boards Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/18/2018	Payee name Corner Store			
Amount (\$) 41.68	Payee address; City; State; 2001 Broadway San Antonio, TX 78212	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Transportation Equipment & Related Expense	Fuel Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED	

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees (Food/Beverage Expense F Gifts/Awards/Memorials Expense F Ommittee Legal Services S	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)	
Orean Gara Fayment	The Instruction Guide explains how to	o complete this form		
1 Total pages Schedule F1: 62 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/22/2018	5 Payee name Corner Store			
6 Amount (\$) 44.29	7 Payee address; City; State; Zip Code 2001 Broadway San Antonio, TX 78212			
PURPOSE OF	(a) Category (See categories listed at the top of this sched Transportation Equipment & Related Expense	(b) Description Fuel		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
Date 10/22/2018	Payee name Cassandra Littlejohn			
Amount (\$) 1875.00	Payee address; City; State; 300 Convents #2500 San Antonio, TX 78205	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Salaries/Wages/Contract Labor	Payroll	tside of Texas, complete schedule T	
		Check if Austin, T	X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/22/2018	Payee name KXTN			
Amount (\$) 3513.40	Payee address; City; State; 12451 Network Blvd #140 San Antonio, TX 78249	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Advertising Expense	Radio ads	tside of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 63 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/22/2018	5 Payee name Jonathan Delmer			
6 Amount (\$) 5000.00	7 Payee address; City; State; Zip Code 300 Convent #2500 San Antonio, TX 78205			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sche Salaries/Wages/Contract Labor	dule) (b) Description Payroll		
EXPENDITURE			iside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 10/22/2018	Payee name Greater Pilgrim Rest Baptist Church			
Amount (\$) 3065.00	Payee address; City; State; 503 Corliss San Antonio, TX 78220	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sche Event Expense	Description D2 Town Hall		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/22/2018	Payee name Beasley Brown Community Center			
Amount (\$) 1250.00	Payee address; City; State; 225 N Swiss San Antonio, TX 78202	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sche Event Expense	Description D2 Town Hall		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	coan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 64 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/22/2018	5 Payee name Duable Brand Trust				
6 Amount (\$) 9234.25	7 Payee address; City; State; Zip Code 1422 E Grayson #3rd San Antonio, TX 78202				
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Consulting Expense	(b) Description Online ads			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/22/2018	Payee name Duable Brand Trust				
Amount (\$) 21650.00					
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Consulting Expense	Communications	•		
EXI ENDITORE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
Date 10/22/2018	Payee name CSG Inc				
Amount (\$) 87500.00	Payee address; City; State; 715 S St. Marys San Antonio , TX 78205	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Advertising Expense	Description Mail program			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 65 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/22/2018	5 Payee name Prestige Printing			
6 Amount (\$) 3383.89	7 Payee address; City; State; Zip Code 8 Burwood Ln San Antonio, TX 78212			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Printing Expense	(b) Description Pamphlets & doc	or hangers	
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/23/2018	Payee name Sage Media			
Amount (\$) 150000.00	Payee address; City; State; Zip Code 1322 G St SE Washington, DC 20003			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Advertising Expense	TV ads	tside of Texas, complete schedule T	
		Check if Austin, T	X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/23/2018	Payee name Lone Star Media			
Amount (\$) 19999.10	Payee address; City; State; 1011 N Frio San Antonio, TX 78207	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scheon Advertising Expense	Signs Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 66 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/23/2018	5 Payee name Broadway Bank			
6 Amount (\$) 22.00	7 Payee address; City; State; Zip Code 1177 NE Loop 410 San Antonio, TX 78209			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Fees	Bank fees Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
Date 10/23/2018	Payee name CSG Inc			
Amount (\$) 1000.00	Payee address; City; State; Zip Code 715 S St. Marys San Antonio , TX 78205			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Advertising Expense	Robo call Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/23/2018	Payee name Wal-Mart			
Amount (\$) 21.63	Payee address; City; State; 3302 SE Military San Antonio, TX 78223	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense P Gifts/Awards/Memorials Expense P	oan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 67 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/24/2018	5 Payee name La Prensa Newspaper			
6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code 816 Camaron #104 San Antonio, TX 78212			
PURPOSE	(a) Category (See categories listed at the top of this sched Advertising Expense	(b) Description Newspaper ads		
OF EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/24/2018	Payee name Alex Perkowski			
Amount (\$) 1014.03	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services		
			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/24/2018	Payee name Sloan Martin			
Amount (\$) 583.33	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
			X, officeholder living expense	
	Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 68 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Chasity Villarreal				
6 Amount (\$) 481.25	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T `X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Sophia Gilmour				
Amount (\$) 583.33	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Chris Hernandez				
Amount (\$) 1400.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 69 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Laura Villalobos				
6 Amount (\$) 411.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held					
Date 10/24/2018	Payee name Angela Anthony				
Amount (\$) 264.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
Date 10/24/2018	Payee name Irene Astran				
Amount (\$) 90.00	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 70 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Effie Boston				
6 Amount (\$) 318.96	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Joy Blake				
Amount (\$) 380.50	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Sandra Gonzales				
Amount (\$) 538.50	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 71 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Alice Gil				
6 Amount (\$) 288.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name LeReta Gatlin-McDavid				
Amount (\$) 776.25	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Evette Falcon				
Amount (\$) 278.65	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
	Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES	FOR BOX 8(a)		
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 72 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/24/2018	5 Payee name Devorah Frost			
6 Amount (\$) 112.50	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name office sought office held				
Date 10/24/2018	Payee name Brianna Campos			
Amount (\$) 351.50	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name PH	Office sought	Office held	
Date 10/24/2018	Payee name Yara Chavarria			
Amount (\$) 233.90	Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
Complete ONLY if direct expenditure to benefit C/C		Check if Austin, T Office sought	X, officeholder living expense Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

	EXPENDITURE CATEGORIES	S FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1:	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Michelle Daniels				
6 Amount (\$) 374.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Payroll (b) Description Field services Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Savanna Campos				
Amount (\$) 270.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Michelle de Uriarte				
Amount (\$) 478.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDI	ED		

	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 74 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Caroline Decherd				
6 Amount (\$) 337.00	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Sharon Sorrell				
Amount (\$) 288.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name David Vidaurri				
Amount (\$) 201.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services			
			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
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	EXPENDITURE CATEGORIES	FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)				
1 Total pages Schedule F1: 75 of 83	2 FILER NAME Secure San Antonios Future 3 Filer ID (Ethics Commission Filers)					
4 Date 10/24/2018	5 Payee name Anthony Vasquez					
6 Amount (\$) 195.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215					
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Payroll (b) Description Field services Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense					
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held			
Date 10/24/2018	Payee name Clement Teddy					
Amount (\$) 294.90	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code				
PURPOSE OF EXPENDITURE Complete ONLY if direct		Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense Office held			
expenditure to benefit C/0	DH					
Date 10/24/2018	Payee name Tambra Satterfield					
Amount (\$) 337.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held			
	ATTACH ADDITIONAL COPIES OF TH	IIS SCHEDULE AS NEEDI	ED			

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense Committee Legal Services Salaries/Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 76 of 83	2 FILER NAME Secure San Antonios Future	o complete this form	3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Hortense Smith				
6 Amount (\$) 432.00	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF	(a) Category (See categories listed at the top of this schedule) Other: Payroll (b) Description Field services				
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
Date 10/24/2018	Payee name Shawn Mothershed				
Amount (\$) 316.75	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	iside of Texas, complete schedule T		
Complete ONLY if direct	Candidate / Officeholder name	Check if Austin, T Office sought	X, officeholder living expense Office held		
expenditure to benefit C/C					
Date 10/24/2018	Payee name Violet Polk				
Amount (\$) 85.75	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 77 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Tamer Morsi				
6 Amount (\$) 468.25	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date 10/24/2018	Payee name Zachary Rouah				
Amount (\$) 194.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Stella Salas				
Amount (\$) 172.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services			
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 78 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/24/2018	5 Payee name David Sanchez			
6 Amount (\$) 93.25	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			iside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH				
Date 10/24/2018	Payee name Jon Servantez			
Amount (\$) 327.50	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held	
Date 10/24/2018	Payee name Isaac Melendez			
Amount (\$) 208.75	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF	Category (See categories listed at the top of this sched Other: Payroll	Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
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EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)	
1 Total pages Schedule F1: 79 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)	
4 Date 10/24/2018	5 Payee name Ashley Moberg			
6 Amount (\$) 67.50	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services		
EXPENDITURE			tside of Texas, complete schedule T X, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held				
Date 10/24/2018	Payee name Teresa Medrano			
Amount (\$) 435.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
			X, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held	
Date 10/24/2018	Payee name Saul Martinez			
Amount (\$) 90.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T	
Complete ONLY if direct expenditure to benefit C/C			X, officeholder living expense Office held	
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	EXPENDITURE CATEGORIES FOR BOX 8(a)				
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 80 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Alan Medrano				
6 Amount (\$) 320.00	7 Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
8 PURPOSE OF	(a) Category (See categories listed at the top of this sched Other: Payroll	(b) Description Field services			
EXPENDITURE			side of Texas, complete schedule T X, officeholder living expense		
9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
Date 10/24/2018	Payee name Rick Knoch				
Amount (\$) 307.92	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	side of Texas, complete schedule T		
			X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
Date 10/24/2018	Payee name Jay Kendall				
Amount (\$) 276.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel ou	iside of Texas, complete schedule T		
Complete ONLY if direct expenditure to benefit C/C		Office sought	X, officeholder living expense Office held		
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EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Fees Food/Beverage Expense Gifts/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 81 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Lucille Knoch				
6 Amount (\$) 230.65	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Payroll (b) Description Field services Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name Rose Jones				
Amount (\$) 70.75	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/24/2018	Payee name LaKesha Jones				
Amount (\$) 212.75	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T 'X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

	EXPENDITURE CATEGORIES	FOR BOX 8(a)			
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense L Fees C Food/Beverage Expense F Gifts/Awards/Memorials Expense F	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)			
1 Total pages Schedule F1: 82 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/24/2018	5 Payee name Demone Johnson				
6 Amount (\$) 255.70	7 Payee address; City; State; Zip Code 1001 Broadway San Antonio, TX 78215				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other: Payroll (b) Description Field services				
EXI ENDITORE			tside of Texas, complete schedule T		
9 Complete ONLY if direct expenditure to benefit C/OH Check if Austin, TX, officeholder living expense Office sought Office held					
Date 10/24/2018	Payee name Ethel Johnson				
Amount (\$) 108.00	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services Check if travel ou	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name DH	Office sought	Office held		
Date 10/24/2018	Payee name Kayleigh Johnson				
Amount (\$) 93.25	Payee address; City; State; 1001 Broadway San Antonio, TX 78215	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sched Other: Payroll	Field services	tside of Texas, complete schedule T		
			• •		
	Complete ONLY if direct expenditure to benefit C/OH Check if Austin, TX, officeholder living expense Office sought Office held				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political C Credit Card Payment	Event Expense Fees Food/Beverage Expense Gifts/Awards/Memorials Expense Legal Services The Instruction Guide explains how	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor to complete this form	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F1: 83 of 83	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)		
4 Date 10/25/2018	5 Payee name Office Max				
6 Amount (\$) 142.97	7 Payee address; City; State; Zip Code 225 E Basse San Antonio, TX 78212				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office supplies Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct					
Date 10/25/2018	Payee name Corner Store				
Amount (\$) 43.03	Payee address; City; State; 2001 Broadway San Antonio, TX 78212	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this scho Transportation Equipment & Related Expense	Fuel Check if travel out	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
Date 10/26/2018	Payee name Wal-Mart				
Amount (\$) 15.92	Payee address; City; State; 3302 SE Military San Antonio, TX 78223	Zip Code			
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this sche Office Overhead/Rental Expense	Office supplies Check if travel out	tside of Texas, complete schedule T X, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held		
	ATTACH ADDITIONAL COPIES OF TH	HIS SCHEDULE AS NEED!	ED .		

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking Event Expense Loan Repayment/Reiml Advertising Expense Fees Office Overhead/Rental Consulting Expense Food/Beverage Expense Polling Expense Contributions/Donations Made By Gifts/Awards/Memorials Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contractions		d/Rental Expense e se s/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out Of District Other (enter a category not listed above)		
	1 _	The Instruction Guide explain	is now to comp	lete this form	
1 Total pages Schedule F2:	2 FILER NAI				3 Filer ID (Ethics Commission Filers)
1 of 1	Secure S	an Antonios Future			
4 TOTAL OF UNITEMIZ	ED UNPAID	INCURRED OBLIGATIONS			\$ 0
5 Date	6 Payee nan	ne			
7 Amount (\$)	8 Payee add	ress; City; Stat	e; Zip Code	:	
9 TYPE OF EXPENDITURE	Politic	cal Non-P	olitical		
10 PURPOSE	(a) Category	(See categories listed at the top of this	schedule)	(b) Description	
OF EXPENDITURE					f travel outside of Texas, complete schedule T f Austin, TX, officeholder living expense
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
Date	Payee nan	ne			
Amount (\$)	Payee add	ress; City; Stat	e; Zip Code	3	
TYPE OF EXPENDITURE	Politi	cal Non-P	olitical		
PURPOSE OF	Category	(See categories listed at the top of this	schedule)	Description	
EXPENDITURE					f travel outside of Texas, complete schedule T f Austin, TX, officeholder living expense
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

	The Instruction Guide explains how to complete this form. 1 Total pages Schedule F3: 1 of 1			
2	FILER NAME Secure San Ar	ntonios Future	3 Filer ID (Ethics Commission Filers)	
4	Date	5 Name of person from whom investment is purchased		
		6 Address of person from whom investment is purchased; City;		
		7 Description of investment		
		8 Amount of investment (\$)		
	Date	Name of person from whom investment is purchased		
		Address of person from whom investment is purchased; City;	State; Zip Code	
	Description of investment			
		Amount of investment (\$)		
		ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

EXPENDITURE CATEGORIES FOR BOX 10(a)

Accounting/Banking Advertising Expense Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Consulting Expense Contributions/Donations Made By	Food/Beverage Expense Polling Expe Gifts/Awards/Memorials Expense Printing Exp	ense	Travel in District Travel Out Of District
Candidate/Officeholder/Political C	ommittee Legal Services Salaries/Wa The Instruction Guide explains how to co	ges/Contract Labor	Other (enter a category not listed above)
1 Total pages Schedule F4:	·	inpiete tins form	2 Files ID (Fabine Commission Files)
1 of 1	2 FILER NAME Secure San Antonios Future		3 Filer ID (Ethics Commission Filers)
1011	occure our Antonios i uture		
4 TOTAL OF UNITEMIZ	ED EXPENDITURES CHARGED TO A CREDIT CAI	RD	\$ 0
5 Date	6 Payee name		
7 Amount (\$)	8 Payee address; City; State; Zip Co	ode	
9 TYPE OF EXPENDITURE	Political Non-Political		
10	(a) Category (See categories listed at the top of this schedule)	(b) Description	
PURPOSE			
OF EXPENDITURE		Check	if travel outside of Texas, complete schedule T
			if Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/C		Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Co	ode	
TYPE OF EXPENDITURE	Political Non-Political		
	Category (See categories listed at the top of this schedule)	Description	
PURPOSE			
OF EXPENDITURE			if travel outside of Texas, complete schedule T if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/0		Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS SO	HEDULE AS NEE	EDED

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

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking Advertising Expense Consulting Expense Contributions/Donations Made By Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Gifts/Awards/Memorials Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Travel in District Travel Out Of District

Candidate/Officeholder/Political (Committee Legal Services Salari	es/Wages/Contract Labor Other (enter a category not listed above)
Credit Card Payment	The Instruction Guide explains how to co	mplete this form
1 Total pages Schedule H: 1 of 1	2 FILER NAME Secure San Antonios Future	3 Filer ID (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Z	ip Code
8	(a) Category (See categories listed at the top of this schedule)	(b) Description
PURPOSE		, , , , , , , , , , , , , , , , , , , ,
OF		
EXPENDITURE		Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/0		Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Z	ip Code
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/6		Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Z	ip Code
	Category (See categories listed at the top of this schedule)	Description
PURPOSE		
OF		<u> </u>
EXPENDITURE		Check if travel outside of Texas, complete schedule T Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/0		Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED

SCHEDULE |

The Instruction Guide explains how to complete this form.		
1 Total pages Schedule I: 1 of 1	2 FILER NAME Secure San Antonios Future	3 Filer ID (Ethics Commission Filers)
4 Date	5 Payee name	,
6 Amount (\$)	7 Payee address; City; State; Zip Code	
Expenditure from corporate funds		
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories.) (b) Description	iption (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	iption (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	iption (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
Expenditure from corporate funds		
PURPOSE OF EXPENDITURE	Category (See instructions for examples of acceptable categories.)	iption (See instructions regarding type of information required.)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED

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

SCHEDULE K

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule K: 1 of 1
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Secure San An	tonios Future	
4 Date	5 Name of person from whom amount is received	8 Amount (\$)
	6 Address of person from whom amount is received; City; State;	Zip Code
	7 Purpose for which amount is received	eck if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State;	Zip Code
	Purpose for which amount is received	eck if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State;	Zip Code
	Purpose for which amount is received	eck if political contribution returned to filer
Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State;	Zip Code
	Purpose for which amount is received Che	eck if political contribution returned to filer
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS	S NEEDED

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

SCHEDULE T

			1 Total pages Schedule T: 1 of 1	
2 FILER NAME Secure San Antonio	os Future		3 Filer ID (Ethics Commission Filers)	
4 Name of Contributor /	Corporation or L	abor Organization / Pledgor / Payee		
5 Contribution / Expendit Schedule A2 Schedule F2	ture reported on Schedule Schedule	B Schedule B(J) Schedule C2	Schedule D Schedule F1 Schedule COH-UC Schedule B-SS	
6 Dates of travel	7 Name of pers	son(s) traveling		
	8 Departure cit	y or name of departure location		
	9 Destination of	ity or name of destination location		
10 Means of transporta	0 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event)			
Name of Contributor /	Corporation or L	abor Organization / Pledgor / Payee		
Contribution / Expendit Schedule A2 Schedule F2				
Dates of travel	Name of pers	son(s) traveling		
	Departure cit	y or name of departure location		
Destination city or name of destination location				
Means of transportation		Purpose of travel (including name of conference, seminar, or other event)		
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee				
Contribution / Expendit	ture reported on			
Schedule A2 Schedule F2	Schedule Schedule		Schedule D Schedule F1 Schedule COH-UC Schedule B-SS	
Dates of travel		son(s) traveling	Golicadic Book	
	Departure cit	y or name of departure location		
	Destination of	ity or name of destination location		
Means of transporta	tion	Purpose of travel (including name of conference, seminar, or other event)		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

POLITICAL COMMITTEE AFFIDAVIT OF DISSOLUTION

FORM PAC - DR

	uide explains how to complete this fo port Type" on page 1 is marked "Diss	
COMMITTEE NAME Secure San Antonios Future		2 Filer ID (Ethics Commission Filers)
Affidavit of Dissolution		
I, the undersigned campaign treasurer activity by this political committee for under the Election Code is required. by me has been reported. I under terminates the appointment of campaign may not make or authorize political ean appointment of campaign treasurer on	this or any other campaign of the informerstand that designating a regular treasurer. I further understexpenditures or accept political	r election for which reporting nation required to be reported port as a dissolution report and that a political committee
	Signature of Campaigr	n Treasurer
	DO NOT SIGN U	INII ESS
	POLITICAL COMMITTEE IS T	
AFFIX NOTARY STAMP / SEAL ABOVE		
Sworn to and subscribed before me, by the said		this the day
of, 20, to certify which, witr	less my hand and sear of office.	
Signature of officer administering oath Pri	inted name of officer administering oath	Title of officer administering oath