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PENDITURES.

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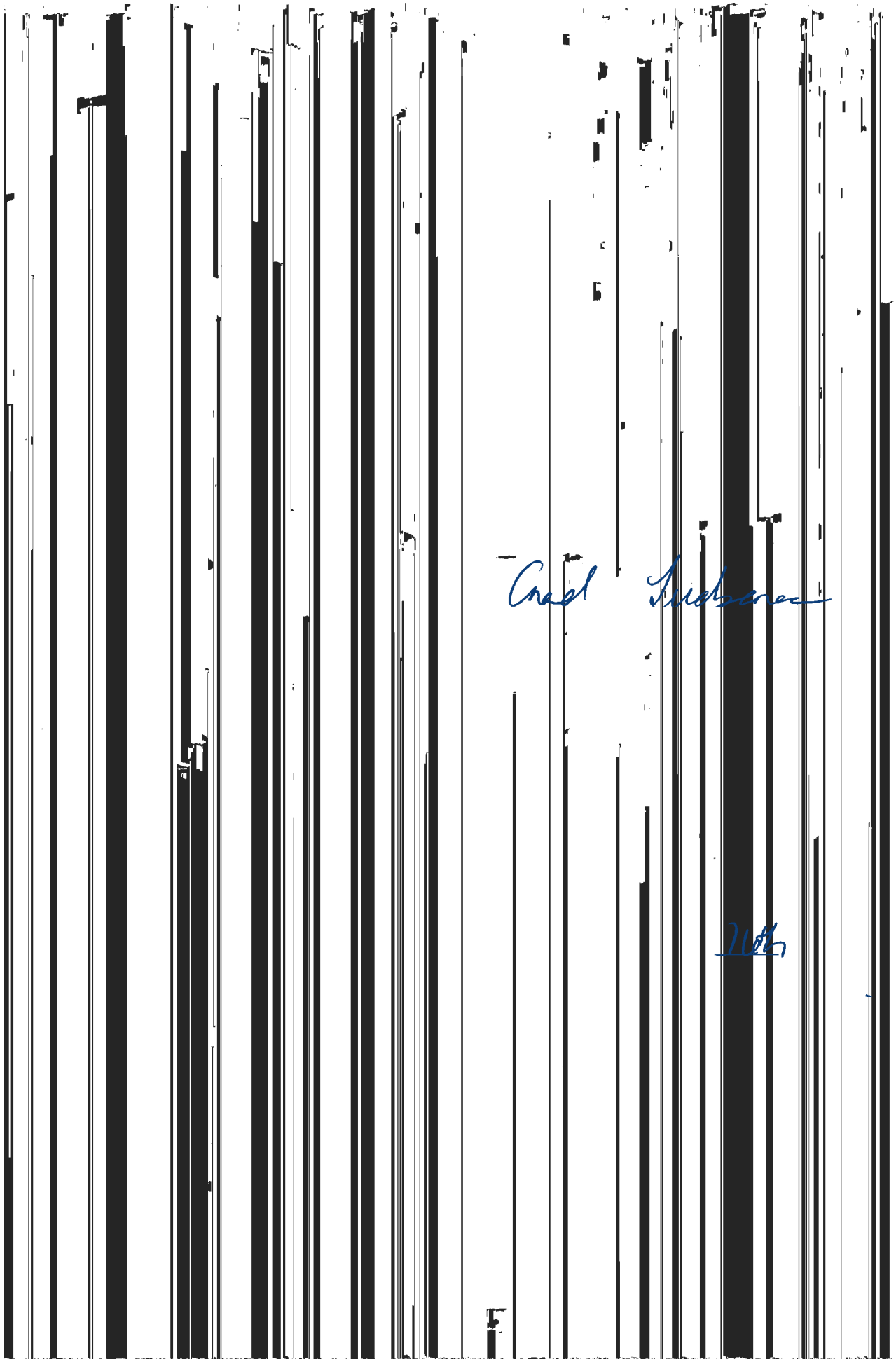

FORM C/OH
COVER SHEET PG 3

20 Filer ID (Ethics Commission Filers)

		SUBTOTAL AMOUNT
	$	19,425.00
TRIBUTIONS	$	4,735.86
	$	2,000.00
	$	
POLITICAL CONTRIBUTIONS	$	8,375.73
	$	
)M POLITICAL CONTRIBUTIONS	$	
	$	
ERSONAL FUNDS	$	
BUTIONS TO A BUSINESS OF C/OH	$	
I POLITICAL CONTRIBUTIONS	$	
SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$	

IONETARY POLITICAL CONTRIBUT ONS

S DULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

LER NAME

3 Filer ID (Ethics Commission Filers)

ael R Luebanos

contributor out-of-state PAC (I

7 Amount of contribution ($)

ice

28/2023

ddress; State; Zip Code

Fort Worth, Texas 76110

ee Instructions) 9 Employer (See Instructions)

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

Amount of contribution ($)

asarez

04/2023

ddress; City State; Zip Code

Fort Worth, Texas 76108

ee Instructions) Employer (See Instructions)

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

Amount of contribution ($)

avila

05/2023

ddress; City; State; Zip Code

Fort Worth, Texas 76180

ee Instructions) Employer (See Instructions)

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

Amount of contribution ($)

05/2023

ddress; City State; Zip Code

Fort Worth, Texas 76109

ee Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requi .

SCHEDULE A

port.

1 Total pages Schedule A1

3 Filer ID (Ethics Commission Filers)

4 Date | 5 Full name of contributor | out-of-state PAC (ID#:) | 7 Amount of contribution ($)

6 Contributor address; | State: | Zip Code

8 Principal occupation / Job title (See Instructions) | 9 Employer (See Instructions)

Date | Full name of contributor | out-of-state PAC (ID#:) | Amount of contribution ($)

Pat Monaghan

Contributor address; | City; | State: | Zip Code

Fort Worth, Texas 76108

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date | out-of-state PAC (ID#:) | Amount of contribution ($)

City; | State: | Zip Code

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

Date | Full name of contributor | out-of-state PAC (ID#:) | Amount of contribution ($)

Contributor address; | City; | State: | Zip Code

Principal occupation / Job title (See Instructions) | Employer (See Instructions)

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TR BUTIONS

SCHEDULE A1

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plete this form.

1 Total pages Schedule A1

3 Filer ID (Ethics Commission Filers)

out-of-state PAC (ID#:) 7 Amount of contribution ($)

State; Zip Code

th, Texas 76109

/ Job title (See Instructions) 9 Employer (See Instructions)

Full name of contributor (ID#:) Amount of contribution ($)

hana Robinson 1,

Contributor address; State; Zip Code

San Antonio, s 78248

/ Job title (See Instructions) Employer (See Instructions)

Full name of contributor out-of-state PAC (Amount of contribution ($)

State; Zip Code ,

, Texas 76105

/ Job title (See Instructions) Employer (See Instructions)

Full name of contributor out-of-state PAC Amount of contribution ($)

ood Government Fund

Contributor address: State; Zip Code ,

Texas 76102

/ Job title (See Instructions) Employer (See Instructions)

COPIES OF THIS SCHEDULE AS NEEDED

e see Instruction guide for additional reporting requirements.

:CHEDULE **A1**

1 Total pages Schedule A1

3 Filer ID (Ethics Commission Filers)

4 Date 5 Full name of contributor out-of-state PAC (ID#) 7 Amount of contribution ($)

City;

8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID#) Amount of contribution ($)

Samson Canty

Contributor address; City; State; Zip Code

Fort Worth, Texas 76109

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID#) Amount of contribution ($)

City; State; Zip Code

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID#) Amount of contribution ($)

City; State; Zip Code

Principal occupation / Job title (See Instructions) Employer (See Instructions)

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TIONS

SCHEDULE A1

lude this page in the report.

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1 Total pages Schedule A1

3 Filer ID (Ethics Commission Filers)

4 Date

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

Stephen Litke

6 Contributor address State; Zip Code

exas 76110

7 Amount of contribution ($)

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution ($)

Dee Kelly Jr.

Contributor address City; State; Zip Code

Fort Worth, Texas 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution ($)

Gerardo Villegas

Contributor address City; State; Zip Code

Fort Worth, Texas 76115

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

out-of-state PAC (ID#:)

Amount of contribution ($)

City; State; Zip Code

xas 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

F THIS SCHEDULE AS NEEDED

ction guide for additional reporting r rements.

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Revised 8/17/2020

DL TICAL CONTR BUTIONS

SCHEDULE A1

tion is not applicable, **DO NOT include this page in the** **t.**

Guide explains how to complete this form.

1 Total pages Schedule A1

3 Filer ID (Ethics Commission Filers)

4 Date | e of contributor | out-of-state PAC (ID#:) | **7** Amount of contribution ($)

Meadows

or address; City; State; Zip Code

Fort Worth, Texas 76107

8 Principal occupation / Job title (See Instructions) **9** Employer (See Instructions)

Date | Full name of contributor | out-of-state PAC (ID#:) | Amount of contribution ($)

Mathew R Carter

Contributor address; City; State; Zip Code

Willowpark, Texas 76008

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date | e of contributor | out-of-state PAC (ID#:) | Amount of contribution ($)

o Garcia

or address; State; Zip Code

1,

Dallas, Texas 75208

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Date | Full name of contributor | out-of-state PAC (ID#:) | Amount of contribution ($)

e Leavens

tor address; City; State; Zip Code

Fort Worth, Texas 76109

Principal occupation / Job title (See Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS

or is out-of-state PAC, please see Instruction guide for additiona

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ng requirements.

MONETARY POLITICAL CONTR BUT ONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form

1 Total pages Schedule A1

FILER NAME

Anael R Luebanos

3 Filer ID (Ethics Commission Filers)

Date | tributor -st e PAC (I | **7** Amount of contribution ($)

Nellie Villalpando

2/05/2023

6 Contributor address; City; State; Zip Code

Fort Worth, Texas 76105

Instructions) **9** Employer (See Instructions)

tributor -st e PAC (ID#:) Amount of contribution ($)

sa

2/05/2023

ess; City; State; Zip Code

Fort Worth, Texas 76105

Instructions) Employer (See Instructions)

tributor -st e PAC (ID#:) Amount of contribution ($)

Jonathan Rivera

2/05/2023

ess State; Zip Code

Fort Worth, Texas 76105

Instructions) Employer (See Instructions)

Full name of contributor -s e PAC (ID#:) Amount of contribution ($)

Hon. Kay Granger

12/05/2023

Contributor address; City; State; Zip Code

Fort Worth, Texas 76107

Instructions) Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POL T CAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1

2 FILER NAME

Anael R Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date

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

J. R. Martinez

7 Amount of contribution ($)

12/28/2023

6 Contributor address; State; Zip Code

Fort Worth, Texas 76107

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

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

Amount of contribution ($)

Javier Hinojosa

12/28/2023

Contributor address; City; State; Zip Code

Fort Worth, Texas 76107

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC

Amount of contribution ($)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Amount of contribution ($)

Contributor address; City; State; Zip Code

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2

2 FILER NAME

Anael R. Luebanos

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS $ 4,735.86

5 Date	6 Full name of contributor ☐ out-of-state PAC (ID#:)	8 Amount of Contribution $	9 In-kind contribution description
12/23/2023	Kelly Hart & Hallman	4,735.86	Event Expense

7 Contributor address; State; Zip Code

Fort Worth, Texas 76102

Check if travel outside of Texas. Complete Schedule T.

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

11 Employer (FOR NON-JUDICIAL) (See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL) (See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date	Full name of contributor ☐ out-of-state PAC (ID#:)	Amount of Contribution $	In-kind contribution description

Contributor address; City; State; Zip Code

Check if travel outside of Texas. Complete Schedule T.

Principal occupation / Job title (FOR NON-JUDICIAL) (See Instructions)

Employer (FOR NON-JUDICIAL) (See Instructions)

Contributor's principal occupation (FOR JUDICIAL)

Contributor's job title (FOR JUDICIAL) (See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

T ONS

SCHEDU E B

applicable, **DO NOT include this page** ne report.

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ID (Ethics

DGES

mount Pledge $ ☐ out-of-state PAC ntribution n

1,000.00

Worth, Texas 76133

ck if travel ou ions) ☐ out-of-state PAC Amount of Pledge $ ntribution n plete Schedule T.

500.00

Worth, Texas

ck if travel ou ions) ☐ out-of-state PAC ID#: ntribution n plete Schedule T.

mount of ledge $

0.00

Fort Worth, Texas

ck if travel ou tions) ☐ out-of-state PAC ID#: ntribution n plete Schedule T.

mount of ledge $ Full name of pledger

ck if travel o tions) ☐ out-of-state PAC ID#: ntribution n plete Schedule T.

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POLITICAL EXPEND TURES MADE FROM POLIT CAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense / Fees
Food/Beverage
Gift/Awards/Me
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide ex... ow to complete this form

2 FILER NAME
Anael R Luebanos

3 Filer ID (Ethics Commission Filers)

4 Date
12/16/2023

5 Payee name
Print Place

Payee address;

City; State; Zip Code

2,539.85

www.printplace.com

8 PURPOSE OF EXPENDITURE

(a) Category (See Categories listed ... the top of this schedule)
xpense

(b) Description
Christmas Cards

Check if travel outs... (c) ... s Complete Schedule T.

Officeholder name

Office sought

Office held

/OH

12/23/2023

Kelly Hart & Hallman

Payee address;

City; State; Zip Code

4,735.86

Fort Worth, Texas 76102

PURPOSE OF EXPENDITURE

Category (See Categories ... e top of this schedule)
Fundraising Expense

Description
Reimbursement for event expense

Officeholder name

Office sought

Office held

/OH

Payee name

12/28/2023

Anedot

Payee address;

City; State; Zip Code

81.75

www.anedot.com

PURPOSE OF EXPENDITURE

Category (See Categories ... e top of this schedule)
Fees

Description
Credit Card Fees

Officeholder name

Office sought

Office held

/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F1

If the … je in the report.

X 8(a)

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

The Instruction Guide explains how to complete this form.

…ges Schedule F1

3 Filer ID (Ethics Commission Filers)

5 Payee name
Rachel DeLira

…$)
7 Payee address;
City
State
Zip Code
…xas

(a) Category (See Categories listed at the top of this schedule)
Fees

(b) Description
Pictures

(c)
Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense

…mplete ONLY if direct …enditure to benefit C/OH
Candidate / Officeholder name
Office sought
Office held

Payee name
AHHS PRA

…$)
Payee address;
City;
State;
Zip Code
Fort Worth, Texas

Category (See Categories listed at the top of this schedule)
Fees

Description
…nsorship

Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense

…mplete ONLY if direct …enditure to benefit C/OH
Candidate / Officeholder name
Office sought
Office held

Payee name
godaddy

…$)
Payee address;
City
State;
Zip Code
www.godaddy.com

Category (See Categories listed at the top of this schedule)
Advertising Expense

Description
…ite

Check if travel outside of Texas. Complete Schedule T.
Check if Austin, TX, officeholder living expense

…mplete ONLY if direct …enditure to benefit C/OH
Candidate / Officeholder name
Office sought
Office held

…ULE AS NEEDED