CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Fernando	ME I	OFFICE USE ONLY
NAME			aaraanaan aan aa baabaan aa	Date Received
	NICKNAME	de Urioste	SUFFIX	October 7, 2024
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX	; APT / SUITE #; (CITY; STATE; ZIP CODE	October 7, 2024 by Edm Butts
MAILING ADDRESS	913 Nile St.	Au	stin TX. 78702	
Change of Address	4854-0085	515VE 41415773	FUTEURIAN	
5 CANDIDATE/ OFFICEHOLDER	AREA CODE	PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked
PHONE	(512)	775-6927		Receipt # Amount S
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	MI	Though #
NAME	NICKNAME	Allen	SUFFIX	Date Processed
	NICKIWAWE	Brooks	SUFFIX	Date Imaged
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT / SI	UITE #: CITY:	STATE, ZIP CODE
TREASURER		_		
ADDRESS (Residence or Business)	2316 Bitter	Creek Dr.	Austin	TX 78744
8 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION	
TREASURER PHONE	(512.)	410-9978		
	(312.)	410-3370		
9 REPORT TYPE	January 15	X 30th day before e	lection Runoff	15th day after campaign treasurer appointment (Officeholder Only)
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report (Attach C/OH - FR)
10 PERIOD	Month	Day Year	Month	Day Year
COVERED	08	/ 09 / 2024	тнгоидн 09	26 / 2024
11 ELECTION	ELECTION DA	TE	ELECTION TYPE	
	Month Day	Year Primary	Runoff Other Description	
	11 / 05	2024 X General	Special	
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known	e Vi
12 OFFICE	STILL WEST		1000 000 000000000000000000000000000000	ee, At-Large Pos 8
14 NOTICE FROM	THIS BOX IS FOR NOTIC	CE OF POLITICAL CONTRIBUTIONS		MADE BY POLITICAL COMMITTEES TO SUPPORT
POLITICAL	THE CANDIDATE / OFFIC	CEHOLDER. THESE EXPENDITURES	MAY HAVE BEEN MADE WITHOUT THE CAN	DIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
Additional Pages	Joenersal			
	SPECIFIC	COMMITTEE CAMPAIGN TRE	ASURER NAME	
		COMMITTEE CAMPAIGN TRE	EASURER ADDRESS	1
	E.	GOTO	DAGE 2	
		60 10	PAGE 2	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME Fernando Luc	as de Urioste		16 Filer ID (E	thics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CO PLEDGES, LOANS, OR GUARANTE CONTRIBUTIONS MADE ELECTRO	ES OF LOANS, OR	\$	0.00
	TOTAL POLITICAL CONTRIBUTI (OTHER THAN PLEDGES, LOANS, C		\$	50,278.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EX	PENDITURE.	\$	0.00
	4. TOTAL POLITICAL EXPENDITUR	ES	\$	17,281.98
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS OF REPORTING PERIOD	MAINTAINED AS OF THE LAS	T DAY \$	32,120.92
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL LAST DAY OF THE REPORTING PE		THE \$	0.00
	wear, or affirm, under penalty of perjury, that the	1 2 E 1	and correct a	nd includes all information
		Furnh	21/2	h
	-	Signature of Car	ndidate or Offi	ceholder
	Please complete	either option below	:	
7				
(1) Affidavit				
NOTARY STAMP/SEA	L			
Sworn to and subscribed	before me by	this the	day	of,
20, to certify	which, witness my hand and seal of office.			
Signature of officer administe	ring oath Printed name of officer as	dministering oath	Title c	of officer administering oath
The 711 TO	OR	315 X N N N N N		10 00 7
(2) Unsworn Declarati	on			
My name is Fernar	ndo Lucas de Urioste	, and my date of birth is	12/17/19	77
	913 Nile St		X . 787	
	(street)	(city) (s	tate) (zip co	de) (country)
Executed inTravis	County, State ofTX, o	n the 4th day of Oct (month	, 20	24 (year)
		_ Two he de be	12-12-	·····
		Signature of Candid	ate/Officeholde	r (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	19 FILER NAME 20 Filer ID (Ethics Cor						
	Fernando Lucas de Urioste						
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT			
1	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	,	\$ 4	49,138.00			
2.	X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,140			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$					
4.	4. SCHEDULE E: LOANS						
5.	X SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL C	\$	17,017.08				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	s					
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	\$					
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	s					
9.	X SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FU	\$	264.90				
10.	0. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL C	ONTRIBUTIONS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBL TO FILER	JTIONS RETURNED	\$				

SCHEDULE A1

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

The	Instruction Guide explains how t	o complete this	s form.		1 Total pages Schedule A1:
2 FILER NAME Ferna	ndo Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Rachel Stone	out-of-state PAC	C (ID#:		7 Amount of contribution (\$)
8/28/2024	6 Contributor address;	City;	State;	Zip Code	25.00
	913 Nile St	Austin	TX.	78702	
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Lawyer GNDC					ctions)
Date	Full name of contributor Samantha Gardner	out-of-state PAC	C (ID#:		Amount of contribution (\$)
8/28/2024	Contributor address;	City;	State;	Zip Code	25.00
	7800 Lowdes Drive	Austin	TX	78745	
Principal occup	ation / Job title (See Instructions)		6.16	loyer (See Instruc appypillar	ctions)
Date	Full name of contributor Michelle Fonzi	out-of-state PAC			Amount of contribution (\$)
8/28/2024	Contributor address;	City;	State;	Zip Code	25.00
	309 Montopolis Dr	Austin	TX	78741	
	ation / Job title (See Instructions) ape Designer		0.00	loyer (See Instruc lichele Fonzi	
Date	Full name of contributor Yen Tran	out-of-state PAC	C (ID#:		Amount of contribution (\$)
8/28/2024	Contributor address;	City;	State;	Zip Code	
	6809 Wake Forest Lan	e Austin	TX.	78723	
Principal occup	ation / Job title (See Instructions)		Emp	loyer (See Instruc	ctions)
Attorne	у		Sta	ate of Texas	

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SCHEDULE A1

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The Instruction Guide explains how to complete this form.					1 Total pages Schedule A1:
2 FILER NAME Fernal	ndo Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Michael Sinclair	out-of-state PAC	: (ID#:)	7 Amount of contribution (\$)
8/28/2024	6 Contributor address;	City;	State;	Zip Code	100.00
	2215 E51st street, Apt 2	03 Austin	TX.	78723	
	pation / Job title (See Instructions)		9 Empl	oyer (See Instru	ctions)
Sale	!S		lm	agine Learn	iing
Date	Full name of contributor Jason McEntire	out-of-state PAC	(ID#:		Amount of contribution (\$)
8/29/2024	Contributor address;	City:	State;	Zip Code	50.00
	11002 Bruneau Trl	Austin	n TX.	78754	
Principal occup	ation / Job title (See Instructions)			oyer (See Instruc	ctions)
Auto S	Sales		Dea	lership	
Date	Full name of contributor Rebekah Cervantes	out-of-state PAC	(ID#:		Amount of contribution (\$)
8/29/2024	Contributor address;	City;	State;	Zip Code	200.00
	po box 26478	Austin	TX	78755	
Principal occup	pation / Job title (See Instructions)		Emple	oyer (See Instruc	ctions)
Not E	Employed		Not Employed		
Date	Full name of contributor Barb Bearden	out-of-state PAC	(ID#	١	Amount of contribution (\$)
8/30/2024	Contributor address;	City;	State;	Zip Code	100.00
	5605 Fort Benton Dr.	Austin.	TX	78735	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Principal occup	ation / Job title (See Instructions)		Emple	oyer (See Instruc	ctions)
Not Er	nployeed		No	t Employee	d

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SCHEDULE A1

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The	Instruction Guide explains how to complete this	1 Total pages Schedule A1: 21	
2 FILER NAME Ferna	ando Lucas de Urioste		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	7 Amount of contribution (\$)	
9/01/2024	6 Contributor address; City; 2400 Georgian Drive Georgeto	State; Zip Code	250.00
8 Principal occu Self	pation / Job title (See Instructions)	9 Employer (See Instruct Self	ions)
Date	Full name of contributor	C (ID#)	Amount of contribution (\$)
9/02/2024	Contributor address; City;	State; Zip Code	50.00
	2417 Harmon Road Silver Spri	ngs MD 20902	
Principal occup	ation / Job title (See Instructions)	ions)	
Date	Roy Wygant	C (ID#:)	Amount of contribution (\$)
9/03/2024	Contributor address; City; 817 Live Oak St. Lake Char	State; Zip Code	250.00
Principal occup	pation / Job title (See Instructions) Lawyer	Employer (See Instruct the Cox Firm	ions)
Date 9/08/2024	Full name of contributor out-of-state PAC	(ID#)	Amount of contribution (\$)
9/06/2024	Contributor address; City;	State; Zip Code	100.00
	2112 Thornton Road #A Austin	TX 78704	
10.41 (24.14)	employed	Employer (See Instruct Charlie Hemmel	
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SCHEDULE A1

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The Instruction Guide explains how to complete this form.					1	Total pages Schedule A1:	
2 FILER NAME Fern	nando Lucas de Urioste				3	Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor Leah Kelly	out-of-state PA	C (ID#:)	7	Amount of contribution (\$)	
9/08/2024	6 Contributor address;	City;	State;	Zip Code		100.00	
	132 Wooden Lodge Di	rive Mancha	aca TX	78652			
	pation / Job title (See Instructions Employed	i)		oyer (See Instruc t Employe	tions	s)	
Date	Full name of contributor Steven Yarak	out-of-state PA	C (ID#			Amount of contribution (\$)	
9/08/2024	Contributor address;	City;	State;	Zip Code		100.00	
	2013 E Cesar Chavez	Apt A Austi	n TX	78702			
	pation / Job title (See Instructions)		Emple	oyer (See Instruc Self	tions	;)	
Date	Full name of contributor	1 - M Jacob - Salar - M 1 - M	C (ID#:)		Amount of contribution (\$)	
9/08/2024	Melissa McRoy Shea		********	** **** * * * * * * * * * * *		100.00	
	Contributor address; 7201 Dan Pass	City;	State;	Zip Code		100.00	
	7201 Dali Fass	Austin	TX	78744			
	pation / Job title (See Instructions)			oyer (See Instruc	tions)	
PU	ublic Defender		Tra	vis County			
Date	Full name of contributor David Messier	out-of-state PAG	C (ID#:			Amount of contribution (\$)	
9/08/2024	Contributor address;	City;	State;	Zip Code		25.00	
	2708 E 2nd St	Austin	TX	78702			
	Dation / Job title (See Instructions) elf Employed		Sel	oyer (See Instruc f	tions)	

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SCHEDULE A1

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The	Instruction Guide explains how	to complete this	s form.		1 Total pages Schedule A1: 21
2 FILER NAME Ferna	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Han Ren	out-of-state PAG			7 Amount of contribution (\$)
9/08/2024	6 Contributor address; 3825 Mattie St.	city; Austin	State;	Zip Code 78723	200.00
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Self				tions)	
Date	Full name of contributor David Dinoff	out-of-state PAG	C (ID#		Amount of contribution (\$)
9/08/2024	Contributor address;	City;	State;	Zip Code	100.00
	9416 Hunter Ln	Austin	TX	78748	
The state of the s	pation / Job title (See Instructions) Estate			oyer (See Instruc apital A Hou	
Date	Full name of contributor	out-of-state PAG	C (ID#:)	Amount of contribution (\$)
	Heather Pagano				000.00
9/08/2024	Contributor address;	City;	State;	Zip Code	200.00
	5404 Wellington Drive	Austin	TX	78723	
AV	oation / Job title (See Instructions) ct Manager		Manager CWO	oyer (See Instruc Arson	tions)
Date	Full name of contributor Abigail Tatow	out-of-state PAG	C (ID#:		Amount of contribution (\$)
9/08/2024	Contributor address; 309 Montopolis Drive	city; Austin	State;	Zip Code 78741	100.00
	pation / Job title (See Instructions)		795	oyer (See Instruc	
Re	altor		С	entral Metro	
	ATTACH ADDITI	ONAL CORIEC	OF THIS S	CHEDIT E ACA	ILLUC I

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SCHEDULE A1

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The	Instruction Guide explains how	to complete this	s form,		1 Total pages Schedule A1:
2 FILER NAME					3 Filer ID (Ethics Commission Filers)
Fern	ando Lucas de Urioste				
4 Date	5 Full name of contributor William B. Knox	out-of-state PAG	C (ID#:)	7 Amount of contribution (\$)
9/08/2024	6 Contributor address;	City;	State;	Zip Code	200.00
	4013 Margarita St	Austin	TX	78723	
[] To [] [] [] [] [] [] [] [] [] [ipation / Job title (See Instructions) search Associate Professo	or	100	oyer (See Instruc Austin	ctions)
Date	Full name of contributor Evan Gardner	out-of-state PAC	C (ID#)	Amount of contribution (\$)
9/08/2024	Contributor address;	City;	State;	Zip Code	25.00
	7800 Lowdes Dr	Austin	TX	78745	
Principal occup	pation / Job title (See Instructions)		Emplo	oyer (See Instruc	ctions)
	Not Employed		Not	Employed	ii .
Date	Full name of contributor Josh Rudow	out-of-state PAC			Amount of contribution (\$)
9/08/2024	Contributor address;	City;	State;	ev cer v	100.00
	2204 Robert Browning S	St. Austin	TX	78723	
Principal occup	pation / Job title (See Instructions)		Emplo	oyer (See Instruc	itions)
Urb	an Planner		City	of Austin	
Date	Full name of contributor Tom Wald	out-of-state PAC	C (ID#)	Amount of contribution (\$)
9/08/2024	Contributor address;	City;	State;	Zip Code	25.00
	4016 Maplewood Ave	Austin	TX	78722	Sir and address of
The same of the sa	pation / Job title (See Instructions)		Emplo	oyer (See Instruc	tions)
Exec	utive Director		Red	d Line Parkv	vay Initiative
			,	3	

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SCHEDULE A1

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The	Instruction Guide explains how to comp	olete this	form.		1 Total pages Schedule A1:
2 FILER NAME Fern	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	Daniel Escobar)	7 Amount of contribution (\$)
9/08/2024	6 Contributor address; City			Zip Code	5.00
	8607 United Kingdom Dr.	Austir	n TX	78748	
8 Principal occu	pation / Job title (See Instructions)		9 Emplo	yer (See Instruc	tions)
Not Em	ployed		Not	Employed	
Date	Full name of contributor	f-state PAC ((ID#)	Amount of contribution (\$)
	Quentin Perry				
9/08/2024	Contributor address; City			Zip Code	170.00
	91 RED RIVER ST, Apt 2913	Austir	n TX.	78701	
Principal occup	pation / Job title (See Instructions)		Emplo	yer (See Instruc	tions)
Grou	p Business Affairs Director		Hails	storm Busin	ess Affairs
Date	Full name of contributor	if-state PAC ((ID#:)	Amount of contribution (\$)
9/08/2024	Contributor address; City			Zip Code	100.00
	7624 TECOMA CIR A	ustin	TX	78735	
Principal occup	pation / Job title (See Instructions)		Emplo	yer (See Instruc	tions)
N	lot Employed		N	ot Employed	t
Date	Full name of contributor out-o	of-state PAC ((ID#:)	Amount of contribution (\$)
9/09/2024	Contributor address; City		State;	Zip Code	20.00
	5611 5th st NW apt 14 W	ashingt	on DC	20011	
	pation / Job title (See Instructions) earcher			yer (See Instruc d Trends	tions)

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SCHEDULE A1

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The	Instruction Guide explains how	1 Total pages Schedule A1: 21		
2 FILER NAME Ferna	ando Lucas de Urioste			3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Kathryn Clarke	out-of-state PAG	C (ID#:)	7 Amount of contribution (\$)
9/09/2024	6 Contributor address;	City;	State; Zip Code	25.00
	2034 Palmer Ave	Larchmo	nt NY 10538	
American Services	pation / Job title (See Instructions) aising communications		9 Employer (See Instruction FoodCorps	tions)
Date	Full name of contributor Magelly Serrano	out-of-state PAC	C (ID#)	Amount of contribution (\$)
9/09/2024	Contributor address;	City;	State; Zip Code	50.00
	4704 Banister Lane	Austin	TX 78745	
	eation / Job title (See Instructions) Employed		Employer (See Instruc Not Employed	tions)
Date	Full name of contributor Sarah Stephens		C (ID#:)	Amount of contribution (\$)
9/11/2024	Contributor address;	City;	State; Zip Code	25.00
	6884 76th Avenue	Salem	OR 97317	
Principal occup Direc	pation / Job title (See Instructions)		Employer (See Instruc Nonprofit	tions)
Date	Full name of contributor Sylvia Sowles	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
9/12/2024	Contributor address;	City;	State; Zip Code	250.00
0, 12,202	2 Walnut Hill Rd	North Yarm	outh ME. 4097	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Not E	Employed		Not Employed	t l
	ATTACH ADDIT		OF THIS SCHEDULE AS N	

SCHEDULE A1

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The	Instruction Guide explains how	to complete this	s form.		1 Total pages Schedule A1:
2 FILER NAME Fern	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Ann Teich	out-of-state PA	C (ID#:)	7 Amount of contribution (\$)
9/16/2024	6 Contributor address;	City;	State;	Zip Code	50.00
	9201 QUAIL HILL CIR	Austin	TX	78758	
8 Principal occu	Not Employed			oyer (See Instruc ot Employed	
Date	Full name of contributor	out-of-state PAG	C (ID#)	Amount of contribution (\$)
9/17/2024	Tatianna Cannon Contributor address;	City;	State;	return control of	25.00
	118 NW 31st	OKC	OK	73118	
Principal occupation / Job title (See Instructions) Fundraising and PA Employer (See Instructions) Teach for Ame					
Date	Full name of contributor Christopher Chaupin	out-of-state PAC) (ID#:)	Amount of contribution (\$)
9/17/2020	Contributor address;	City;	State;	Zip Code	250.00
District Committee	11018 Avenu Malkenu A	ve Housto			4
74	pation / Job title (See Instructions) anager			oyer (See Instruction See In	tions)
Date	Full name of contributor Drew Edge	out-of-state PAC) (ID#)	Amount of contribution (\$)
9/19/2024	Contributor address;	City;	State;	Zip Code	50.00
	5305 Guadalupe St, Unit	B Austin	TX	78751	
- INCOMPANY	pation / Job title (See Instructions)			yer (See Instruct	
Attor	ney			McGinnis Lo	ocimage

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SCHEDULE A1

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The	Instruction Guide explains how	to complete this	s form.		Total pages Schedule A1: 21
2 FILER NAME					3 Filer ID (Ethics Commission Filers)
Ferna	ando Lucas de Urioste				
4 Date	5 Full name of contributor Eric Goff	out-of-state PAG			7 Amount of contribution (\$)
9/20/2024	6 Contributor address;	City;		Zip Code	250.00
	404 Rio Grande #403	Austin	TX	78701	
8 Principal occu	pation / Job title (See Instructions)	yer (See Instruc	tions)		
Owne	er		Eric V	Vinters Goff	LLC
Date	Full name of contributor Brenda Blair	out-of-state PAC			Amount of contribution (\$)
9/22/2024	Contributor address;	City;		Zip Code	50.00
	2208 E 13th St	Austin	TX	78702	
	nation / Job title (See Instructions) Not Employed			yer (See Instruct t Employed	ions)
Date	Full name of contributor Kelly Gagnon	out-of-state PAC	(ID#:		Amount of contribution (\$)
9/22/2024	Contributor address;	City;	State;	Zip Code	100.00
	1710 E 40th St	Austin	TX	78722	
	pation / Job title (See Instructions) pal Planner		100000000000000000000000000000000000000	yer (See Instructity of Austin	AC 025024-0388
Date	Full name of contributor Stephen Ratcliff	out-of-state PAC	(ID#:		Amount of contribution (\$)
9/22/2024	Contributor address;	City;	State;	Zip Code	100.00
	5009 Calabria Ct 603	7 Austi	n TX	78738	
Principal occup	pation / Job title (See Instructions)		Employ	yer (See Instruct	tions)
Ph	nysician		U	S Anesthes	ia Partners

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SCHEDULE A1

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The	Instruction Guide explains how to co	1 Total pages Schedule A1; 21				
2 FILER NAME Ferna	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)	
4 Date	Discovery Gerdes	ut-of-state PAC			7 Amount of contribution (\$)	
9/22/2024	6 Contributor address;	City;		Zip Code	25.00	
	17104 Fitzgerald Ln R	ound Ro	ck TX	78664		
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Program Mgr Oracle					tions)	
Date	Lynn Cowles		711 V PALALINA		Amount of contribution (\$)	
9/22/2024	Contributor address; (City;	State;	Zip Code	100.00	
	2405 Little John Ln Au	ustin	TX	78704		
Principal occup	pation / Job title (See Instructions)		Emplo	yer (See Instruct	tions)	
Manager Every Texan				100 CONTROL OF THE CO		
Date	Full name of contributor	ut-of-state PAC	(ID#:	_)	Amount of contribution (\$)	
	Greg Anderson					
9/22/2024	Contributor address; C	City;	State;	Zip Code	100.00	
	301 West Avenue, 3302	Austin	TX	78701		
	pation / Job title (See Instructions) dable Homeownership			Employer (See Instructions) Austin Habitat for Humanity		
Date	Full name of contributor	ut-of-state PAC	C (ID#)	Amount of contribution (\$)	
9/22/2024	Contributor address; C	ity:	State;	Zip Code	100.00	
	8000 Weldon Springs Ct	Austin	TX	78726		
Principal occup	pation / Job title (See Instructions)		Emplo	yer (See Instruc	tions)	
Attori	ney		S	elf		

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SCHEDULE A1

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The	Instruction Guide explains how	to complete thi	s form.		1 Total pages Schedule A1:
2 FILER NAME Fern	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Emily George	out-of-state PA	C (ID#:		7 Amount of contribution (\$)
9/22/2024	6 Contributor address;	City;	State;	Zip Code	100.00
	2704 Kerrybrook Lane	Austin	TX	78757	100.00
8 Principal occupation / Job title (See Instructions) Preschool Teacher 9 Employer (See Instructions) Covenant P					stions) Sbyterian Church
Date	Full name of contributor Lawrence Gonzales	out-of-state PA	C (ID#)	Amount of contribution (\$)
9/22/2024	Contributor address;	City;	State;	Zip Code	25.00
	1076 Verbena Dr	Austin	TX	78750	
Principal occupation / Job title (See Instructions) Government Employee				oyer (See Instruc ate of Texas	//2
Date:	Full name of contributor Stephen Kirchen	out-of-state PA	C (ID#:		Amount of contribution (\$)
9/22/2024	Contributor address;	City;	State;	Zip Code	20.00
	7305 Loganberry Dr	Austin	TX	78745	
	pation / Job title (See Instructions)		Employer (See Instructions) Self		tions)
Date	Full name of contributor Taren Hodges	out-of-state PA	G (ID#:)	Amount of contribution (\$)
9/22/2024	Contributor address;	City;	State;	Zip Code	10.00
	4406 Garnett St	Austin	TX	78745	
Principal occup	pation / Job title (See Instructions)		Empl	oyer (See Instruc	tions)
Organizer			Education Austin		ustin
	ATTACH ADDITI	ONAL COPIES	OF THIS S	CHEDULF AS N	JEEDED

SCHEDULE A1

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

The	Instruction Guide explains how		1 Total pages Schedule A1: 21			
2 FILER NAME Fern	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor Brooke Beasley	out-of-state PA			7 Amount of contribution (\$)	
9/22/2024		City;		Zip Code	20.00	
	9101 La Cresada Dr, Apt	t. 2732 Aus	tin TX	78749		
8 Principal occupation / Job title (See Instructions) Operations Manager 9 Employer (See Instru Hello World C					omputer Science	
Date	Full name of contributor Stan Pipkin	out-of-state PA	C (ID#		Amount of contribution (\$)	
9/22/2024		City;		Zip Code	25.00	
	907 Gulllett st.	Austin	TX	78702		
Principal occupation / Job title (See Instructions) CEO				yer (See Instruct thouse Sola		
Date	Full name of contributor Jared Lindauer	out-of-state PA			Amount of contribution (\$)	
9/22/2024	Contributor address;	City;		Zip Code	125.00	
	4012 Crescent Dr	Austin	TX	78722		
Principal occup	pation / Job title (See Instructions)		Emplo	yer (See Instruct	ions)	
Attor	rney		Lindauer Law Group PLLC			
Date	Full name of contributor Abigail Tatkow	out-of-state PA	C (ID#		Amount of contribution (\$)	
9/22/2024	Contributor address;	City;	State;	Zip Code	25.00	
	309 Montopolis Drive	Austin	TX	78741	23.00	
Principal occup	pation / Job title (See Instructions)		Emplo	yer (See Instruct	ions)	
Real	tor		Cei	ntral Metro		

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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	s form.		Total pages Schedule A1: 21
2 FILER NAME Fern	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor			7 Amount of contribution (\$)	
9/22/2024	6 Contributor address; 1516 Villanova Dr	_{City;}		Zip Code 78757	50.00
	pation / Job title (See Instructions) able Housing			yer (See Instruct of Austin	tions)
Date	Full name of contributor Nida Heston	out-of-state PAG	C (ID#		Amount of contribution (\$)
9/22/2024	Contributor address;	City;		Zip Code	25.00
	N Secretary Emiliarity (Colored Colored Colore	raii Austi	t sensor	7. 323.0. 13.023	
	pation / Job title (See Instructions) al Worker			ver (See Instructi al Worker	ions)
Date	Full name of contributor Minda Anderson	out-of-state PAC		~	Amount of contribution (\$)
9/22/2024	Contributor address;	City;	State; 2	Zip Code	25.00
	3414 Dunliegh Dr	Austin	TX	78745	
	pation / Job title (See Instructions) prarian			ver (See Instructi Austin ISD	ions)
Date	Full name of contributor Sue Gail	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
9/22/2024	Contributor address;	City;	State; Z	Zip Code	25.00
	1109 E 10th St	Austin	TX	78702	
Principal occup	pation / Job title (See Instructions) /St			ver (See Instructi tin Energy	ions)
3⊛⊹					
	ATTACHADDIT	IONAL COPIES	OF THIS SC	HEDULE AS N	EEDED

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	s form.		1 Total pages Schedule A1:	
2 FILER NAME Fern	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor Kathy Sokolic	out-of-state PAC (ID#:)			7 Amount of contribution (\$)	
9/22/2024	6 Contributor address;	City;	State;	Zip Code	100.00	
	4636 Ruiz St	Austin	TX	78723		
8 Principal occupation / Job title (See Instructions) Realtor 9 Employer (See Instruct Realty Austin				ttions)		
Date	Full name of contributor Stephanie K. Davis	out-of-state PAC	C (ID#:	.)	Amount of contribution (\$)	
9/22/2024	Contributor address;	City;		Zip Code	50.00	
	7206 Lamplight Ln	Austin	TX	78731		
Principal occupation / Job title (See Instructions) Nurse Practitioner Employer (See Instructions) Stephanie I			oyer (See Instruc tephanie Da			
Date	Full name of contributor Alice Woods	out-of-state PAC	C (ID#:)	Amount of contribution (\$)	
9/23/2024	Contributor address;	City;	State;	Zip Code	50.00	
	1805 South 3rd Street	Austin	TX	78704		
Principal occupation / Job title (See Instructions) Consultant				Employer (See Instructions) Broadleaf Community Consulting		
Date	Full name of contributor Mary Whittle	out-of-state PAC	S (ID#:)	Amount of contribution (\$)	
9/23/2024	Contributor address;	City;	State;	Zip Code	250.00	
	4513 Spanish Oak Trail	Austin	TX	78731		
Principal occup Attorne	pation / Job title (See Instructions)			oyer (See Instruc uerrero Whi		

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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.		Total pages Schedule A1: 21
2 FILER NAME Ferna	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Skyler Korgel	out-of-state PAC			7 Amount of contribution (\$)
9/23/2024	6 Contributor address;	City;	State;	Zip Code	8.00
	4803 Bundyhill Dr	Austin	TX	78723	9000 40
8 Principal occupation / Job title (See Instructions) Legislative Director 9 Employer (See Instructions) Texas House					of Representatives
Date	Full name of contributor Ezequiel Cotler	out-of-state PAC			Amount of contribution (\$)
9/23/2024	Contributor address;	City;	State;	Zip Code	50.00
	6516 East Hill Drive	Austin	TX	78731	
Principal occupation / Job title (See Instructions)			Emplo	yer (See Instruc	tions)
Billing				Shalom Au	stin
Date	Full name of contributor Timothy Raub	out-of-state PAC	(ID#:)	Amount of contribution (\$)
9/23/2024	Contributor address;	City;	State;	Zip Code	100.00
	113 Lost Creek Drive	Portland	TX	78374	
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Raub Law Firm		
Date	Full name of contributor Margaret Heidrick	out-of-state PAC	(ID#:		Amount of contribution (\$)
9/24/2024	Contributor address;	City;	State;	Zip Code	125.00
	6100 Hogan	Austin	TX	78741	
Principal occup	ation / Job title (See Instructions)			oyer (See Instruc	tions)

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SCHEDULE A1

The The	Instruction Guide explains how t	o complete this	form.		1 Total pages Schedule A1:
2 FILER NAME Fern	ando Lucas de Urioste				3 Filer ID (Ethics Commission Filers)
4 Date	Sergio Davila	out-of-state PAC			7 Amount of contribution (\$)
9/25/2024	6 Contributor address; 604 Boise	City;		ip Code 78041	25.00
	 pation / Job title (See Instructions) Attorney		9 Employe Self	er (See Instruc	tions)
Date	Full name of contributor Athena Alexander	out-of-state PAC	C (ID#		Amount of contribution (\$)
9/26/2024	Contributor address:	City;	State; Z	-50	500.00
	1528 Homewood Circle	Round Ro	ock TX	78665	
Principal occup	pation / Job title (See Instructions)		Employe	City of Au	
Date	Full name of contributor Ben Mandelkern	out-of-state PAC			Amount of contribution (\$)
9/26/2024	Contributor address;	City;	State; Z	11 11 24 179	25.00
	136 Walker Hill Road	South Roy	yalton V	Т 5068	
101 121	pation / Job title (See Instructions) anager		0 3	ound Post	
Date	Full name of contributor Amy Young	out-of-state PAC	3 (ID#)	Amount of contribution (\$)
9/26/2024	Contributor address;	City;	State; Zi	p Code	25.00
	348 Nayatt Road	Barrington	RI	2806	
Principal occup	pation / Job title (See Instructions)			er (See Instruc	tions)
Advo	ocate		CAA		
	ATTACHADDITIO				EEDED

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	s form.	1 Total pages Schedule A1:	
2 FILER NAME Ferna	ando Lucas de Urioste			3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor	out-of-state PAG	C (ID#:)	7 Amount of contribution (\$)	
9/26/2024	Richard Canzonetti				
9/20/2024	6 Contributor address;	City;	State; Zip Code	150.00	
	22 Lambert Common	Wilton	CT 6897	-	
	pation / Job title (See Instructions) Not Employed		9 Employer (See Instru Not Employe		
Date	Full name of contributor	out-of-state PAC	C (ID#)	Amount of contribution (\$)	
	Gail Stein			0.030 (0.03 <u>0.30.0 (0.95 0.05 0.05 0.05 0.05 0.05 0.05 0.05 </u>	
9/26/2024	Contributor address;	City;	State; Zip Code	250.00	
	69 Longwood Av. apt 110	02 Brooklin	e MA 2446		
	pation / Job title (See Instructions)		Employer (See Instru		
Not Em	iployed		Not Employe	d	
Date	Full name of contributor Edith Canzonetti		(ID#)	Amount of contribution (\$)	
9/26/2024	Contributor address;	City;	State; Zip Code	250.00	
	3 Top Sail rd	Norwalk	CT 6853		
	pation / Job title (See Instructions) Employed		Employer (See Instructions) Not Employed		
Date	Full name of contributor Rachel Stone	out-of-state PAC	(ID#)	Amount of contribution (\$)	
9/26/2024	Contributor address;	City;	State; Zip Code	5000.00	
	913 Nile St.	Austin	TX 78702		
	pation / Job title (See Instructions)		Employer (See Instru	ctions)	

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SCHEDULE A1

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

Julie Potts		Total pages Schedule A1: 21 Filer ID (Ethics Commission Filers)
5 Full name of contributor out Julie Potts		3 Filer ID (Ethics Commission Filers)
Julie Potts		III
	of-state PAC (ID#	7 Amount of contribution (\$)
	ty; State; Zip Code	150.00
4351 Mueller Ln	Prosper TX	
Drawn St.	9 Employer (See Instr Squibb Taylo	
Full name of contributor	of-state PAC (ID#	Amount of contribution (\$)
		100.00
344 Pinecrest Beach Dr, Barr	stable County, MA 2536	
	Employer (See Instru Not Employed	**************************************
Deborah Hanson		
Contributor address; Ci	y; State; Zip Code	100.00
906 North Riviera Cir Ce	dar Park TX 78613	
	Employer (See Instr ACC	uctions)
Full name of contributor	of-state PAC (ID#	Amount of contribution (\$)
Contributor address; Ci	y; State; Zip Code	35.00
913 Nile St A	ustin TX 78702	
pation / Job title (See Instructions)	Employer (See Instr GNDC	
	4351 Mueller Ln pation / Job title (See Instructions) Full name of contributor Judith Berg Contributor address; Ci 344 Pinecrest Beach Dr, Barn ation / Job title (See Instructions) Not Employeed Full name of contributor Deborah Hanson Contributor address; Cit 906 North Riviera Cir Ce pation / Job title (See Instructions) not Professor Full name of contributor Rachel Stone Contributor address; Cit 913 Nile St A pation / Job title (See Instructions)	4351 Mueller Ln Prosper TX pation / Job title (See Instructions) Deligion / Job title (See Instructions) Prosper TX 9 Employer (See Instructions) Full name of contributor Judith Berg Contributor address; City; State; Zip Code 344 Pinecrest Beach Dr, Barnstable County, MA 2536 ation / Job title (See Instructions) Not Employeed Full name of contributor Deborah Hanson Contributor address; City: State: Zip Code 906 North Riviera Cir Cedar Park TX 78613 Pation / Job title (See Instructions) ACC Full name of contributor Rachel Stone Contributor address; City: State: Zip Code Park TX 78702 Employer (See Instructions) Contributor address; City: State: Zip Code ACC Full name of contributor Rachel Stone Contributor address; City: State: Zip Code ACC Full name of contributor Rachel Stone Contributor address; City: State: Zip Code Austin TX 78702 Employer (See Instructions) GNDC

SCHEDULE A1

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

=		·*
The	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 21
2 FILER NAME Fern	ando Lucas de Urioste	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor	7 Amount of contribution (\$)
9/03/2024	6 Contributor address; City; State; Zip Code	5,000.00
	1041 Laguna Springs Dr Weston FL 33326	
	t Employed 9 Employer (See Instructions) Not Employed	
Date	Full name of contributor	Amount of contribution (\$)
9/10/2024	Contributor address; City; State; Zip Code	15,000
	8716 N. Mopac Expressway Austin TX 78759	
Principal occu	pation / Job title (See Instructions) Employer (See Instru	actions)
Date	Full name of contributor out-of-state PAC (ID# Jose de Urioste	Amount of contribution (\$)
9/16/2024	Contributor address; City; State; Zip Code	1,000
	993 Jep Wheeler Rd. Woodstock GA. 30188	
Principal occu	pation / Job title (See Instructions) Not Employed Employer (See Instru Not Employed	octions)
Date	Full name of contributor	70 . 0
9/17/2024	Contributor address; City; State; Zip Code	1,000
	One Hanson Place, Apt 18A Brooklyn NY 11243	
Principal occu	pation / Job title (See Instructions) Employer (See Instru	actions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS	NEEDED

SCHEDULE A1

The	Instruction Guide explains how	to complete this	form.	Total pages Schedule A1: 21		
2 FILER NAME Ferna	ando Lucas de Urioste			3 Filer ID (Ethics Commission Filers)		
4 Date	5 Full name of contributor David Schlagel		(ID#)	7 Amount of contribution (\$)		
9/19/2024	6 Contributor address;	City;	State; Zîp Code	5,000.00		
l I	606 Arcadia PI	San Antonio	o TX 78209			
	upation / Job title (See Instructions) sident	tions) C.				
Date	Full name of contributor Susan Stone	out-of-state PAC	(ID#)	Amount of contribution (\$)		
9/19/2024	Contributor address;	City;	State; Zip Code	10,000		
	2 Old Town Hwy, Unit 23. East Haven CT. 06512					
	pation / Job title (See Instructions)		Employer (See Instruc	tions)		
Not E	Employed		Not Employed			
Date	Full name of contributor	out-of-state PAC	(ID#)	Amount of contribution (\$)		
	Contributor address;	City;	State; Zip Code			
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)		
Date	Full name of contributor	out-of-state PAC	(ID#)	Amount of contribution (\$)		
	Contributor address;	City;	State; Zip Code			
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)		
	ATTACH ADDIT		OF THIS SCHEDULE AS N			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:		
² FILER NAME Fernando Lucas de Urioste			3 Filer ID (Ethics Commission Filers)		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$		
5 Date 9/05/2024	6 Full name of contributor	Zip Code	8 Amount of Contribution \$ 640.00 Check if travel outsi	9 In-kind contribution description Campaign T-Shirts de of Texas. Complete Schedule T.	
10 Principal occ	supation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIA	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	tor's job title (FOR JU	DICIAL) (See Instructions)	
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	of contributor's spou	se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor)	Amount of Contribution \$	In-kind contribution description	
9/22/2024	Contributor address; City; State; 1745 W Anderson Ln. Ste 600, Austin, TX	Zip Code 78757	500.00 Check if travel outside	Food discount Ge of Texas. Complete Schedule T.	
Principal occ	eupation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employe	r (FOR NON-JUDICIA	AL)(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 spous	se (if any) (FOR JUDICIAL)	
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	ATTACH ADDITIONAL COPIES OF T If contributor is out-of-state PAC, please see Instructi			requirements.	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees (Food/Beverage Expense Gift/Awards/Memorials Expense Food	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how 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: 2 FILER NAME Fernando Lucas de Urioste			3 Filer ID (Ethic	cs Commission Filers)	
4 Date 9/07/2024	5 Payee name Texas Democratic Party				
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
1,100	314 Highland Blvd	Austin	TX	78752	
8	(a) Category (See Categories listed at the top of this sch	(b) Description			
PURPOSE OF EXPENDITURE	Office Overhead	VAN acces	S		
	(c) Check if travel outside of Texas. Complete Sche	dule T. Check if Austin	n, TX, officeholder livin	g expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
9/11/2024	Tico Mendoza Studios				
Amount (\$)	Payee address;	City;	State;	Zip Code	
150.00	10607 Double Tree Cove	Austin	TX	78750	
	Category (See Categories listed at the top of this sche	edule) Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Photography	1		
	Check if travel outside of Texas. Complete Sche	dule T. Check if Austin	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
9/19/2024	The Craft Advocate				
Amount (\$)	Payee address;	City;	State;	Zip Code	
2,525.00	7210 Fred Morse Dr.	Austin	TX	78723	
	Category (See Categories listed at the top of this sche	dule) Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Graphic desig	n, website b	ase	
	Check if travel outside of Texas. Complete Sche	dule T. Check if Austin	n. TX. officeholder livin	g expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NEE	DED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Candidate/Officeholder/Politica Credit Card Payment		Wages/Contract Labor	Travel Out Of Distric Other (enter a category	ct ory not listed above)	
1 Total pages Schedule F1:	² FILER NAME Fernando Lucas de Urioste		3 Filer ID (Ethic	s Commission Filers)	
4 Date 9/10/24	5 Payee name Empower	,			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
10.00	2800 Royal Ave, Suite 204	Madison	Wiscons	sin 53713	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Voter contact and canvasing			
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct			Office held		
Date	Payee name				
9/18/2024	CheckMark Typesetting				
Amount (\$)	Payee address;	City;	State;	Zip Code	
5,171.06	3217 N. IH 35	Austin	TX	78722	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising	Yard signs			
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
9/24/2024	CheckMark Typesetting				
Amount (\$)	Payee address;	City;	State;	Zip Code	
5,139.45	3217 N. IH 35	Austin	TX	78722	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising	Road signs			
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	DED		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees C Food/Beverage Expense F y Gift/Awards/Memorials Expense F	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)		
		low to complete this form.	T a		
1 Total pages Schedule F1:	Fernando Lucas de Urioste		3 Filer ID (Ethics Commission File	ers)	
4 Date	5 Payee name				
9/22/2024	Backspace - Anderson				
6 Amount (\$)	7 Payee address;	City;	State; Zip Code		
1,526.44	1745 W Anderson Ln. Ste 600	. Austin	TX 78757		
8	(a) Category (See Categories listed at the top of this sch	(b) Description			
PURPOSE OF EXPENDITURE	Food/Beverage Expense	Food, drink	Food, drinks, and service		
	(c) Check if travel outside of Texas. Complete Sche	dule T. Check if Aust	in, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name		X		
8/30/2024	Triaz Digital Printing LLC				
Amount (\$)	Payee address;	City;	State; Zip Code		
184.97	2013 Wells Branch Pkwy Suit	307 Austin	TX 78728	l .	
	Category (See Categories listed at the top of this sche	dule) Description			
PURPOSE OF EXPENDITURE	Advertising Expense	Push cards			
	Check if travel outside of Texas. Complete Sche	dule T. Check if Aust	in. TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name				
9/19/2024	Frost Bank				
Amount (\$)	Payee address;	City;	State; Zip Code		
30.00	1200 Barbara Jordan Blvd Suite	200 Austin	TX 78723		
	Category (See Categories listed at the top of this sche	dule) Description			
PURPOSE OF EXPENDITURE	Accounting/Banking	Wire Trans	fer Fees		
=	Check if travel outside of Texas. Complete Sche-	dule T. Check if Aust	in, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/V The Instruction Guide explains how to committee	Vages/Contract Labor	Other (enter a cate	gory not listed above)	
1 Total pages Schedule F1:	² FILER NAME Fernando Lucas de Urioste		3 Filer ID (Eth	cs Commission Filers)	
4 Date 9/26/2024	5 Payee name ActBlue	1			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code	
180.16	P.O. Box 441146	Somerville	MA	02144-0031	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE OF EXPENDITURE	Fees	Processing Fees			
	(c) 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/OF	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
9/12/2024	The Craft Advocate				
Amount (\$)	Payee address;	City;	State;	Zip Code	
1000	7210 Fred Morse Dr.	Aastitin	TIX	7/88/7/2233	
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Advertising	Graphic design, website maintenance			
	Check if travel outside of Texas, Complete Schedule T. Check if Austin. TX, offi		n. TX, officeholder livi	officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held	
Date	Payee name				
Amount (\$)	Payee address;	City:	State;	Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description			
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, 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 NEE	DED		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Accounting/Banking Consulting Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel In District Contributions/Donations Made By Gift/Awards/Memorials Expense Printing Expense Travel Out Of District Legal Services Other (enter a category not listed above) Candidate/Officeholder/Political Committee Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Fernando Lucas de Urioste 4 Date 5 Payee name 9/08/2024 Costco 6 Amount (\$) 7 Payee address; City; State; Zip Code 264.90 Reimbursement from 4301 W William Cannon Dr BLDG A100 TX Austin 78749 political contributions intended (b) Description 8 (a) Category (See Categories listed at the top of this schedule) PURPOSE Food/Beverage Chips, snacks, sodas, beer. EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name Amount (\$) Payee address; City: State: Zip Code Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description **PURPOSE** OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Office sought Candidate / Officeholder name Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name Amount (\$) Payee address; City: State; Zip Code Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE Check if travel outside of Texas, Complete Schedule T Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED