

# 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) 00090898		2 Total pages filed: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Misael D.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/10/2022		
	NICKNAME LAST SUFFIX Ramos				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 2401 Manor rd  Austin, TX 78722		Date Hand-delivered or Date Postmarked		
			Receipt # Amount		
			Date Processed		
			Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Misael D.				
	NICKNAME LAST SUFFIX Ramos				
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2401 Manor rd  Austin, TX 78722				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (972) 849-4335				
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year 08/15/2022    10/01/2022				
10 ELECTION	ELECTION DATE Month Day Year 11/08/2022		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Council Member, District 1 District 1		

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 22

13 C / OH NAME	Ramos, Misael D.	14 Filer ID	(Ethics Commission Filers)
		00090898	

15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	<b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,881.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	<b>TOTAL POLITICAL EXPENDITURES</b>	\$	6,349.08
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	8,866.66
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Misael D. Ramos

\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

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

3 of 22

<b>18 FILER NAME</b> Ramos, Misael D.		<b>19 Filer ID</b> (Ethics Commission Filers) 00090898
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,881.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 3,158.75
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 3,190.33
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/11 Rpt: 4/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/14/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Botchlet, Jeremiah <hr/> <b>6</b> Contributor address; City; State; Zip Code 1511 East 12th  Austin, TX 78702	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Finance		<b>9</b> Employer (See Instructions) Birch Grove Software
Date 09/11/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burke, Cecelia <hr/> Contributor address; City; State; Zip Code 6500 Santolina Cv  Austin, TX 78731	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) TBD		Employer (See Instructions) TBD
Date 09/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Neal <hr/> Contributor address; City; State; Zip Code 1811 JJ Seabrook  Austin, TX 78721	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dang, Marvin <hr/> Contributor address; City; State; Zip Code 843 Smoke Signal Pass  Pflugerville, TX 78660	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eddins, Erne <hr/> Contributor address; City; State; Zip Code 656 south Cochran  Los Angeles, CA 90036	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/11 Rpt: 5/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/24/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fambro, Mariah <hr/> <b>6</b> Contributor address; City; State; Zip Code 1607 Harness Raceway  Austin, TX 78660	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filo, John <hr/> Contributor address; City; State; Zip Code 908 E 14th Street  Austin, TX 78702	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) TBD
Date 08/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Pedro <hr/> Contributor address; City; State; Zip Code 3106 Paxon Dr  Mansfield, TX 76084	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guel, Alexis <hr/> Contributor address; City; State; Zip Code 14205 Lyndora Lane  Pflugerville, TX 78660	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrington, Jim <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/11 Rpt: 6/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/13/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hootman, Joe <hr/> <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houck, Patrick <hr/> Contributor address; City; State; Zip Code 1511 E 12th Street  Austin, TX 78702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurtado, Barbara <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hyams, Chris <hr/> Contributor address; City; State; Zip Code 4101 Edgemont Dr  Austin, TX 78731	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Indeed
Date 09/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jammer, Brian <hr/> Contributor address; City; State; Zip Code 1197 San Bernard  Austin, TX 78702	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) TBD		Employer (See Instructions) TBD

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/11 Rpt: 7/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/17/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jansson, Eric <hr/> <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasrotia, Vikrant <hr/> Contributor address; City; State; Zip Code 1717 Moore Ln  Van Alstyne, TX 75495	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joyner, Deserick <hr/> Contributor address; City; State; Zip Code 1661 TH Johnson  Austin, TX 76574	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kannan, Prabhu <hr/> Contributor address; City; State; Zip Code 3802 Byron Dr  Austin, TX 78704	Amount of Contribution (\$)  \$251.00
Principal occupation / Job title (See Instructions) Scaled Operations Director		Employer (See Instructions) Indeed
Date 09/08/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) King, David <hr/> Contributor address; City; State; Zip Code 1808 Kerr Street  Austin, TX 78704	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) TBD		Employer (See Instructions) TBD

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/11 Rpt: 8/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/29/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korshidian, Yasminda <hr/> <b>6</b> Contributor address; City; State; Zip Code 4508 Elwood Road  Austin, TX 78722	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuczaj, Dustin <hr/> Contributor address; City; State; Zip Code 4304 Cornell Dr  Plano, TX 75093	Amount of Contribution (\$)  \$75.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Llanes, Daniel <hr/> Contributor address; City; State; Zip Code 4907 Red Bluff Rd.  Austin, TX 78702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Macon, Steven <hr/> Contributor address; City; State; Zip Code 1305A Waller Street  Austin, TX 78702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/21/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maher, Caitlin <hr/> Contributor address; City; State; Zip Code 1509 New York Avenue  Austin, TX 78702	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/11 Rpt: 9/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/16/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Berri <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78722	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/18/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Ly <hr/> Contributor address; City; State; Zip Code 3003 Glen Hollow Cir.  Carrollton, TX 75007	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Machine operator		Employer (See Instructions) AMS
Date 09/22/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nguyen, Phong <hr/> Contributor address; City; State; Zip Code 1528 Lorson Loop  Round Rock, TX 78665	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/12/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ogundeyi, LaKetica <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olbert, Arthur <hr/> Contributor address; City; State; Zip Code 1705 Blue Heron Cove  Round Rock, TX 78681	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Technology development and alliance management consultant		Employer (See Instructions) FlexSkill

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/11 Rpt: 10/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/23/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Evan <hr/> <b>6</b> Contributor address; City; State; Zip Code 2803 SILVERWAY DR  Austin, TX 78757	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/24/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Penarredonda, Ulises <hr/> Contributor address; City; State; Zip Code 5787 Hunting Creek Rd  Alexandria, VA 22314	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/20/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pham, Vinh <hr/> Contributor address; City; State; Zip Code 1405 West 51st Street  Austin, TX 78756	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Partner Sales Director		Employer (See Instructions) Panther
Date 09/09/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramirez, Lisa <hr/> Contributor address; City; State; Zip Code 2512 Tom Miller St  Austin, TX 78723	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions) Operations SVP		Employer (See Instructions) Indeed
Date 10/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rana, Navin <hr/> Contributor address; City; State; Zip Code 6641 Arbor Cove  Plano, TX 75034	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/11 Rpt: 11/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/14/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, John <b>6</b> Contributor address; City; State; Zip Code  TX	<b>7</b> Amount of Contribution (\$)  \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) President		<b>9</b> Employer (See Instructions) Capitol Services, Inc.
Date 09/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segura-Kelly, Daniel Contributor address; City; State; Zip Code 11703 Prado Ranch Blvd. Austin, TX 78725	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/16/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Lee Contributor address; City; State; Zip Code 1800 New York Ave Austin, TX 78702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherman, Lee Contributor address; City; State; Zip Code 1800 New York Ave Austin, TX 78702	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/01/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slater, Kari Contributor address; City; State; Zip Code 1708 New York Ave Austin, TX 78702	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/11 Rpt: 12/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/24/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Garrett <hr/> <b>6</b> Contributor address; City; State; Zip Code 11909 Pino Alto Dr  Austin, TX 78725	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Tech support		<b>9</b> Employer (See Instructions) Telus International
Date 09/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Michelle <hr/> Contributor address; City; State; Zip Code 2100 Maple Ave.  Austin, TX 78722	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/14/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tibbs, Isaiah <hr/> Contributor address; City; State; Zip Code  TX	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Kathy <hr/> Contributor address; City; State; Zip Code 3003 Glen Hollow Cir.  Carrollton, TX 75007	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/04/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tran, Lynda <hr/> Contributor address; City; State; Zip Code 11908 Tedford St.  Austin, TX 78753	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) QA Manager		Employer (See Instructions) Indeed

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/11 Rpt: 13/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/28/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucek, Daniel <hr/> <b>6</b> Contributor address; City; State; Zip Code 2200 E 22nd St  Austin, TX 78722	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/30/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vandyke, Thomas <hr/> Contributor address; City; State; Zip Code 1506 New York Ave  Austin, TX 78702	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/27/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vigil, Danae <hr/> Contributor address; City; State; Zip Code 2032 Cactus Mound Dr  Leander, TX 78641	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/26/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wheat, Brian <hr/> Contributor address; City; State; Zip Code 3905 Chase Cir Apt B Austin, TX 78721	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Software developer		Employer (See Instructions) TLC
Date 09/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White-Ramsey, Chela <hr/> Contributor address; City; State; Zip Code 6728 Sunderland Trail  Austin, TX 78747	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/11 Rpt: 14/22
<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/06/2022	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witte, Tracy <b>6</b> Contributor address; City; State; Zip Code 908 East 14th Street Austin, TX 78702	<b>7</b> Amount of Contribution (\$) \$400.00
<b>8</b> Principal occupation / Job title (See Instructions) Researcher		<b>9</b> Employer (See Instructions) Self employed
Date 09/10/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Patty Contributor address; City; State; Zip Code Austin, TX 78748	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 09/15/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Youngblood, Arlene Contributor address; City; State; Zip Code 4807 BundyHill Dr. Austin, TX 78723	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/03/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yu, Jennifer Contributor address; City; State; Zip Code 713 s Logan st Denver, CO 80209	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/4 Rpt: 15/22	<b>2</b> FILER NAME Ramos, Misael D.	<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		<b>\$</b>
<b>5</b> Date 09/19/2022	<b>6</b> Payee name AMPRO Productions	
<b>7</b> Amount (\$) \$806.67	<b>8</b> Payee address; City; State; Zip Code 7202 Smokey Hill Rd,  Austin, TX 78736	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Large signs
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2022	Payee name Austin Texas Print	
Amount (\$) \$205.68	Payee address; City; State; Zip Code 6448 E Hwy 290 c102  Austin, TX 78723	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fliers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 2/4 Rpt: 16/22	<b>2</b> FILER NAME Ramos, Misael D.	<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
<b>5</b> Date 09/20/2022	<b>6</b> Payee name Fedex	
<b>7</b> Amount (\$) \$13.53	<b>8</b> Payee address; City; State; Zip Code 2406 W Parmer Ln Suite 94  Austin, TX 78727	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business cards
<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2022	Payee name Fedex	
Amount (\$) \$13.53	Payee address; City; State; Zip Code 2406 W Parmer Ln Suite 94  Austin, TX 78727	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/4 Rpt: 17/22	2 FILER NAME Ramos, Misael D.	3 Filer ID (Ethics Commission Filers) 00090898
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 08/23/2022	6 Payee name Fedex	
7 Amount (\$) \$155.87	8 Payee address; City; State; Zip Code 2406 W Parmer Ln Suite 94  Austin, TX 78727	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign banner
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2022	Payee name Fedex	
Amount (\$) \$161.08	Payee address; City; State; Zip Code  TX	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment for fliers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

## EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

## EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/4 Rpt: 18/22	2 FILER NAME Ramos, Misael D.	3 Filer ID (Ethics Commission Filers) 00090898
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 09/24/2022	6 Payee name Mi Madre's	
7 Amount (\$) \$780.51	8 Payee address; City; State; Zip Code 2201 Manor Rd,  Austin, TX 78722	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet and Greet event
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/16/2022	Payee name North Loop Signs	
Amount (\$) \$1,021.88	Payee address; City; State; Zip Code 102 N Loop Blvd E  Austin, TX 78751	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/4 Rpt: 19/22	<b>2</b> FILER NAME Ramos, Misael D.	<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/22/2022	<b>5</b> Payee name Costco credit card	
<b>6</b> Amount (\$) \$205.68  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code PO Box 78019  Phoenix, AZ 85062	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card for fliers
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/19/2022	Candidate/Officeholder name Office sought Office held	
Payee name Costco credit card		
Amount (\$) \$806.67  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 78019  Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card for large signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/16/2022	Candidate/Officeholder name Office sought Office held	
Payee name Costco credit card		
Amount (\$) \$1,021.88  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code PO Box 78019  Phoenix, AZ 85062	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card for yard signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/4 Rpt: 20/22		<b>2</b> FILER NAME Ramos, Misael D.		<b>3</b> Filer ID (Ethics Commission Filers) 00090898	
<b>4</b> Date 09/01/2022		<b>5</b> Payee name Credit card			
<b>6</b> Amount (\$) \$161.08  <input type="checkbox"/> Reimbursement from political contributions intended		<b>7</b> Payee address; City; State; Zip Code  TX			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for fliers	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/01/2022		Payee name Credit card			
Amount (\$) \$9.95  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code  TX			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for web hosting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/01/2022		Payee name Credit card			
Amount (\$) \$21.64  <input type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code  TX			
<b>PURPOSE OF EXPENDITURE</b>		Category (See Categories listed at the top of this schedule) Credit Card Payment		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for media USB cable	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 3/4 Rpt: 21/22	<b>2</b> FILER NAME Ramos, Misael D.	<b>3</b> Filer ID (Ethics Commission Filers) 00090898
<b>4</b> Date 09/25/2022	<b>5</b> Payee name Southwest Credit card	
<b>6</b> Amount (\$) \$780.50  <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code P.O. Box 15298  Wilmington, DE 19850	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Credit Card Payment	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card for meet and greet event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/27/2022	Payee name Southwest Credit card	
Amount (\$) \$13.53  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 15298  Wilmington, DE 19850	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card for business cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/20/2022	Payee name Southwest Credit card	
Amount (\$) \$13.53  <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 15298  Wilmington, DE 19850	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card for business cards
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 4/4 Rpt: 22/22	2 FILER NAME Ramos, Misael D.	3 Filer ID (Ethics Commission Filers) 00090898
4 Date 08/23/2022	5 Payee name Southwest credit card	
6 Amount (\$) \$155.87  <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 15298  Wilmington, DE 19850	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Payment of credit card bill for signage
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held