

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

| | | | | | |
|---|--|---|--|---|--|
| 1 Filer ID (Ethics Commission Filers) 00090898 | | 2 Total pages filed: 23 | | OFFICE USE ONLY | |
| 3 CANDIDATE / OFFICEHOLDER NAME | | MS / MRS / MR FIRST MI Misael D. | | | |
| | | NICKNAME LAST SUFFIX Ramos | | Date Received ELECTRONICALLY FILED 11/18/2022 | |
| 4 ORIGINAL REPORT TYPE | | <input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded modified reporting limit <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final Report (Attach C/OH-FR) | | Date Hand-delivered or Date Postmarked | |
| 5 ORIGINAL PERIOD COVERED | | Month Day Year Month Day Year 08/15/2022 THROUGH 10/01/2022 | | Receipt # Amount | |
| | | | | Date Processed | |
| | | | | Date Imaged | |

6 EXPLANATION OF CORRECTION

The "Total Political Contributions Maintained as of the Last Day of the Reporting Period" was misunderstood. The value inputted was the amount up to the day of report submittal, not the reporting period.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☐ **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

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 oath Printed name of officer administering oath Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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: 23 | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR FIRST MI Misael D. | | OFFICE USE ONLY Date Received ELECTRONICALLY FILED 11/18/2022 | | |
| | 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

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| | | | |
|----------------|------------------|-------------|----------------------------|
| 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. TOTAL POLITICAL CONTRIBUTIONS (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. TOTAL POLITICAL EXPENDITURES | \$ 6,349.08 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 4,690.67 |
| 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**

4 of 23

| | | |
|--|---|---|
| 18 FILER NAME Ramos, Misael D. | | 19 Filer ID (Ethics Commission Filers) 00090898 |
| 20 SCHEDULE SUBTOTALS 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

| | | |
|---|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 1/11 Rpt: 5/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/14/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Botchlet, Jeremiah <hr/> 6 Contributor address; City; State; Zip Code 1511 East 12th Austin, TX 78702 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Principal occupation / Job title (See Instructions) Finance | | 9 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

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/11 Rpt: 6/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/24/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fambro, Mariah <hr/> 6 Contributor address; City; State; Zip Code 1607 Harness Raceway Austin, TX 78660 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 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

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/11 Rpt: 7/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/13/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hootman, Joe <hr/> 6 Contributor address; City; State; Zip Code TX | 7 Amount of Contribution (\$) \$10.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 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

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/11 Rpt: 8/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/17/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jansson, Eric <hr/> 6 Contributor address; City; State; Zip Code TX | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 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

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/11 Rpt: 9/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/29/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korshidian, Yasminda <hr/> 6 Contributor address; City; State; Zip Code 4508 Elwood Road Austin, TX 78722 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 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

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/11 Rpt: 10/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/16/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McBride, Berri <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78722 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 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

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/11 Rpt: 11/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/23/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Evan <hr/> 6 Contributor address; City; State; Zip Code 2803 SILVERWAY DR Austin, TX 78757 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 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

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/11 Rpt: 12/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/14/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, John 6 Contributor address; City; State; Zip Code TX | 7 Amount of Contribution (\$) \$400.00 |
| 8 Principal occupation / Job title (See Instructions) President | | 9 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

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/11 Rpt: 13/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/24/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Garrett <hr/> 6 Contributor address; City; State; Zip Code 11909 Pino Alto Dr Austin, TX 78725 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) Tech support | | 9 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

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/11 Rpt: 14/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/28/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucek, Daniel <hr/> 6 Contributor address; City; State; Zip Code 2200 E 22nd St Austin, TX 78722 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 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

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/11 Rpt: 15/23 |
| 2 FILER NAME Ramos, Misael D. | | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/06/2022 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Witte, Tracy 6 Contributor address; City; State; Zip Code 908 East 14th Street Austin, TX 78702 | 7 Amount of Contribution (\$) \$400.00 |
| 8 Principal occupation / Job title (See Instructions) Researcher | | 9 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.

| | | |
|--|--|---|
| 1 Total pages Schedule F4: Sch: 1/4 Rpt: 16/23 | 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 09/19/2022 | 6 Payee name AMPRO Productions | |
| 7 Amount (\$) \$806.67 | 8 Payee address; City; State; Zip Code 7202 Smokey Hill Rd, Austin, TX 78736 | |
| 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 Large signs |
| 11 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 | (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 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: 2/4 Rpt: 17/23 | 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 09/20/2022 | 6 Payee name Fedex | |
| 7 Amount (\$) \$13.53 | 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 Business cards |
| 11 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 | (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 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: 18/23 | 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: 19/23 | 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.

| | | |
|--|--|--|
| 1 Total pages Schedule G: Sch: 1/4 Rpt: 20/23 | 2 FILER NAME Ramos, Misael D. | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/22/2022 | 5 Payee name Costco credit card | |
| 6 Amount (\$) \$205.68 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code PO Box 78019 Phoenix, AZ 85062 | |
| 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 for fliers |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/19/2022 | 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 | Candidate/Officeholder name | Office sought Office held |
| Date 09/16/2022 | 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 | 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: 2/4 Rpt: 21/23 | 2 FILER NAME Ramos, Misael D. | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/01/2022 | 5 Payee name Credit card | |
| 6 Amount (\$) \$161.08 <input type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code TX | |
| 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 Credit card payment for fliers |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| 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 | |
| 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 Credit card payment for web hosting |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| 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 | |
| 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 Credit card payment for media USB cable |
| 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: 3/4 Rpt: 22/23 | 2 FILER NAME Ramos, Misael D. | 3 Filer ID (Ethics Commission Filers) 00090898 |
| 4 Date 09/25/2022 | 5 Payee name Southwest Credit card | |
| 6 Amount (\$) \$780.50 <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 for meet and greet event |
| 9 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: 23/23 | 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 |