

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1


The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 46
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Alexander		OFFICE USE ONLY  Date Received  <b>RECEIVED</b> <b>OCT 02 2020</b>  Date Hand-delivered or Date Postmarked  Receipt # Amount \$ Date Processed Date Imaged
	NICKNAME LAST SUFFIX Alex Villalobos		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 1630 Kyle, TX 78640		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION ( 512 ) 787-5194		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Monica		7 CAMPAIGN TREASURER ADDRESS (Residence or Business)
	NICKNAME LAST SUFFIX Becerra		
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 205 Cheatham St. San Marcos, TX 78666		8 CAMPAIGN TREASURER PHONE AREA CODE PHONE NUMBER EXTENSION ( 512 ) 787-4972	
9 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)		
10 PERIOD COVERED	Month Day Year    7 / 1 / 2020    THROUGH    Month Day Year    9 / 24 / 2020		
11 ELECTION	ELECTION DATE Month Day Year 11 / 03 / 2020	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) Kyle, TX City Council Place 5		13 OFFICE SOUGHT (if known) Hays County Sheriff
GO TO PAGE 2			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

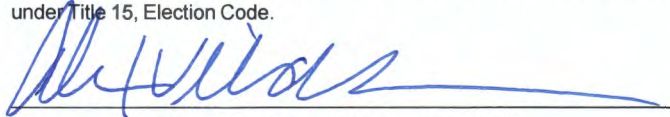
<b>14 C/OH NAME</b> Alexander (Alex) Villalobos		<b>15 Filer ID</b> (Ethics Commission Filers)	
<b>16 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <div style="text-align: right; color: blue; font-weight: bold; font-size: 1.2em; transform: rotate(180deg);">RECEIVED</div> <div style="margin-top: 20px;"> <input type="checkbox"/> Additional Pages         </div>	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b> <div style="font-size: 1.2em; font-weight: bold;">N/A</div>	
	<b>COMMITTEE ADDRESS</b>  		
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>  		
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>  		
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0	
<b>EXPENDITURE TOTALS</b>	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,240.00	
<b>CONTRIBUTION BALANCE</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0	
<b>OUTSTANDING LOAN TOTALS</b>	4. TOTAL POLITICAL EXPENDITURES	\$ 7,425.85	
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD		\$ 2074.96	
6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0	

**18 AFFIDAVIT**

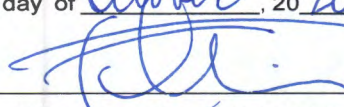


AFFIX NOTARY STAMP / SEAL ABOVE

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.

  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Alex Villalobos, this the 2nd day of October, 2020, to certify which, witness my hand and seal of office.

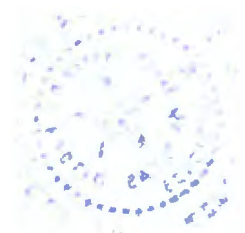
  
 Signature of officer administering oath

Anita Collins  
 Printed name of officer administering oath

Notary  
 Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3****19 FILER NAME****Alexander (Alex) Villalobos****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE****SUBTOTAL  
AMOUNT**

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,240.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$ 0
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 7,425.85
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

1

2 FILER NAME

Alexander (Alex) Villalobos

3 Filer ID (Ethics Commission Filers)

4 Date

12/13/2019

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Gloria DeLeon

6 Contributor address;

City;

State;

Zip Code

861 Arroyo Ranch Kyle, TX 78640

7 Amount of contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

Executive Director

9 Employer (See Instructions)

Date

12/13/2019

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Harry Ekakiadis

Contributor address;

City;

State;

Zip Code

105 Spring Branch Loop Kyle, TX 78640

Amount of contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

12/13/2019

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Manuel de la Rosa

Contributor address;

City;

State;

Zip Code

9911 Oak Hollow Dr Austin, TX 78758

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Law Enforcement

Employer (See Instructions)

Date

12/23/2013

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Pete McRae

Contributor address;

City;

State;

Zip Code

915 S College Georgetown, TX 78626

Amount of contribution (\$)

\$250.00

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

2

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

1/15/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Dr. Israel Najera Jr

**6** Contributor address;

City;

State;

Zip Code

100-B N. Edward Gary, Ste 106 San Marcos, TX 78666

**7** Amount of contribution (\$)

\$100.00

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

Counselor

**9** Employer (See Instructions)

Date

1/15/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

All Makes Collision

Contributor address;

City;

State;

Zip Code

1000 River Road, Ste L San Marcos, TX 78666

Amount of contribution (\$)

\$1000.00

Principal occupation / Job title (See Instructions)

Auto Body Repair Shop

Employer (See Instructions)

Date

1/28/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jeramie Hernandez (JJ Towing)

Contributor address;

City;

State;

Zip Code

5684 IH 35 South New Braunfels, TX 78132

Amount of contribution (\$)

\$300.00

Principal occupation / Job title (See Instructions)

Towing Company

Employer (See Instructions)

Date

2/7/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marcie Parker

Contributor address;

City;

State;

Zip Code

10106 Brantley Bend Austin, TX 78748

Amount of contribution (\$)

\$100.00

Principal occupation / Job title (See Instructions)

Unemployed

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1: 3

2 FILER NAME

Alexander (Alex) Villalobos

3 Filer ID (Ethics Commission Filers)

4 Date

2/7/2020

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Heiko Stang

7 Amount of contribution (\$)

\$15.00

6 Contributor address;

City;

State;

Zip Code

380 Turkey Hollow Wimberley, TX 78676

8 Principal occupation / Job title (See Instructions)

Not Employed

9 Employer (See Instructions)

Date

2/21/2020

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Patricia Krov

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

251 Lone Man Overlook Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

3/11/2020

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Leonard & Andrea West Trust

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

8223 S St Paul Way Centennial, CO 80122

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Date

3/30/2020

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Tara Racine

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

291 Brunson Ln. Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
4**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

3/30/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Adrian Garcia Campaign

**7** Amount of contribution (\$)

\$1000.00

**6** Contributor address; City; State; Zip Code

PO BOX 56386 Houston, TX 77256

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

County Commissioner

**9** Employer (See Instructions)

Date

4/3/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Raoul Belleau

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

291 Brunson Ln. Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Electrical Engineer

Employer (See Instructions)

Date

4/3/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heiko Stang

Amount of contribution (\$)

\$7.50

Contributor address; City; State; Zip Code

380 Turkey Hollow Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

4/20/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Peter Sprouse

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

600 Elliott Ranch Rd Buda, TX 78610

Principal occupation / Job title (See Instructions)

Biologist

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5

2 FILER NAME

Alexander (Alex) Villalobos

3 Filer ID (Ethics Commission Filers)

4 Date

2/28/2020

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tara Racine

6 Contributor address;

City;

State;

Zip Code

291 Brunson Ln Wimberley, TX 78676

7 Amount of contribution (\$)

\$50.00

8 Principal occupation / Job title (See Instructions)

Not Employed

9 Employer (See Instructions)

Date

5/4/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Raoul Belleau

Contributor address;

City;

State;

Zip Code

291 Brunson Ln Wimberley, TX 78676

Amount of contribution (\$)

\$50.00

Principal occupation / Job title (See Instructions)

Electrical Engineer

Employer (See Instructions)

Date

5/4/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heiko Stang

Contributor address;

City;

State;

Zip Code

380 Turkey Hollow Wimberley, TX 78676

Amount of contribution (\$)

\$7.50

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

6/1/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heiko Stang

Contributor address;

City;

State;

Zip Code

380 Turkey Hollow Wimberley, TX 78676

Amount of contribution (\$)

\$7.50

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
6**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

6/1/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tara Racine

**6** Contributor address;

City;

State;

Zip Code

291 Brunson Ln Wimberley, TX 78676

**7** Amount of contribution (\$)

\$50.00

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

Not Employed

**9** Employer (See Instructions)

## Date

6/5/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Raoul Belleau

## Contributor address;

City;

State;

Zip Code

291 Brunson Ln Wimberley, TX 78676

## Amount of contribution (\$)

\$50.00

## Principal occupation / Job title (See Instructions)

Electrical Engineer

## Employer (See Instructions)

## Date

6/8/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Marcello &amp; Stephanie Saenz

## Contributor address;

City;

State;

Zip Code

6406 Back Bay Ln Austin TX 78739

## Amount of contribution (\$)

\$75.00

## Principal occupation / Job title (See Instructions)

Manager

## Employer (See Instructions)

## Date

6/12/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Hays County Democratic Party

## Contributor address;

City;

State;

Zip Code

PO Box 1245 Buda, TX 78610

## Amount of contribution (\$)

\$2000.00

## Principal occupation / Job title (See Instructions)

Political Party

## Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

7

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

6/22/2020

**5** Full name of contributor☐ out-of-state PAC (ID# \_\_\_\_\_)

Angelita &amp; Rosalio Tobias, Trust

**7** Amount of contribution (\$)

\$300.00

**6** Contributor address;

City;

State;

Zip Code

1818 Roland Ln Kyle, TX 78640

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

Retired

**9** Employer (See Instructions)

Date

6/29/2020

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Tara Racine

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

291 Brunson Ln. Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

7/13/2020

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Raoul Belleau

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

291 Brunson Ln. Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Electrical Engineer

Employer (See Instructions)

Date

7/13/2020

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Heiko Stang

Amount of contribution (\$)

\$7.50

Contributor address;

City;

State;

Zip Code

380 Turkey Hollow Wimberley TX 78676

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

8

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

7/23/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Manuel de la Rosa

**7** Amount of contribution (\$)

\$100.00

**6** Contributor address;

City;

State;

Zip Code

136 Trinity Kyle, TX 78640

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

Law Enforcement

**9** Employer (See Instructions)

Date

7/23/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cat Yuracka

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

317 Quarry St San Marcos, TX 78666

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

7/23/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Oscar Avalos

Amount of contribution (\$)

\$5.00

Contributor address;

City;

State;

Zip Code

302 E 8th St Anton, TX 79313

Principal occupation / Job title (See Instructions)

Student

Employer (See Instructions)

Date

7/23/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Oscar Avalos

Amount of contribution (\$)

\$10.00

Contributor address;

City;

State;

Zip Code

302 E 8th St Anton, TX 79313

Principal occupation / Job title (See Instructions)

Student

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

9

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

7/23/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Oscar Avalos

**7** Amount of contribution (\$)

\$5.00

**6** Contributor address;

City;

State;

Zip Code

302 E 8th St Anton, TX 79313

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

Student

**9** Employer (See Instructions)

Date

7/23/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael Sanchez

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

1118 Amberwood Loop Kyle, TX 78640

Principal occupation / Job title (See Instructions)

Professor

Employer (See Instructions)

Date

7/30/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Michael &amp; Teresa Tobias

Amount of contribution (\$)

\$200.00

Contributor address;

City;

State;

Zip Code

PO Box 1858 Kyle, TX 78640

Principal occupation / Job title (See Instructions)

Law Enforcement

Employer (See Instructions)

Date

7/30/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Daniel Gorman

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

5515 Davis Ln. Austin, TX 78749

Principal occupation / Job title (See Instructions)

Project Manager

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

10

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

7/30/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heiko Stang

**7** Amount of contribution (\$)

\$10.00

**6** Contributor address;

City;

State;

Zip Code

380 Turkey Hollow Wimberley, TX 78676

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

Not Employed

**9** Employer (See Instructions)

Date

7/30/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Ruben Obell

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

4681 Larkspur Dr Brownsville, TX 78526

Principal occupation / Job title (See Instructions)

Administrator

Employer (See Instructions)

Date

7/30/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Raoul Belleau

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

291 Brunson Ln. Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Electrical Engineer

Employer (See Instructions)

Date

7/30/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heiko Stang

Amount of contribution (\$)

\$7.50

Contributor address;

City;

State;

Zip Code

380 Turkey Hollow Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:  
11**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

7/30/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tara Racine

**6** Contributor address; City; State; Zip Code

291 Brunson Ln Wimberley, TX 78676

**7** Amount of contribution (\$)

\$50.00

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

Not Employed

**9** Employer (See Instructions)

## Date

8/10/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Anita Collins

Contributor address; City; State; Zip Code

924 W Hopkins St San Marcos TX 78666

## Amount of contribution (\$)

\$25.00

## Principal occupation / Job title (See Instructions)

Screenwriter

## Employer (See Instructions)

## Date

8/10/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mark Trahan

Contributor address; City; State; Zip Code

4428 Mather Kyle, TX 78640

## Amount of contribution (\$)

\$100.00

## Principal occupation / Job title (See Instructions)

Assistant Professor

## Employer (See Instructions)

## Date

8/28/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Peter Sprouse

Contributor address; City; State; Zip Code

600 Elliott Ranch Rd Buda, TX 78610

## Amount of contribution (\$)

\$25.00

## Principal occupation / Job title (See Instructions)

Biologist

## Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

12

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

8/28/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Elaine Cardenas

**7** Amount of contribution (\$)

\$50.00

**6** Contributor address;

City;

State;

Zip Code

501 Carney Ln Wimberley, TX 78676

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

Not Employed

**9** Employer (See Instructions)

Date

8/28/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jayme Mathias

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

1612 Garden St Austin, TX 78702

Principal occupation / Job title (See Instructions)

Executive Director

Employer (See Instructions)

Date

8/28/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Leslie Carnes

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

351 Limestone Ln Driftwood, TX 78619

Principal occupation / Job title (See Instructions)

Criminal Analyst

Employer (See Instructions)

Date

9/2/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Richard Cronshey

Amount of contribution (\$)

\$25.00

Contributor address;

City;

State;

Zip Code

123 Bridle Path Kyle, TX 78640

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

13

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

9/2/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Adrian Garcia Campaign

**7** Amount of contribution (\$)

\$1000.00

**6** Contributor address;

City;

State;

Zip Code

PO Box 30066 Houston, TX 77249

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

County Commissioner

**9** Employer (See Instructions)

## Date

9/2/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Cat Yuracka

## Amount of contribution (\$)

\$25.00

## Contributor address;

City;

State;

Zip Code

317 Quarry St San Marcos, TX 78666

## Principal occupation / Job title (See Instructions)

Not Employed

## Employer (See Instructions)

## Date

9/2/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Tara Racine

## Amount of contribution (\$)

\$50.00

## Contributor address;

City;

State;

Zip Code

291 Brunson LN Wimberley, TX 78676

## Principal occupation / Job title (See Instructions)

Not Employed

## Employer (See Instructions)

## Date

9/8/2020

## Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Lonnie &amp; Brenda Basham

## Amount of contribution (\$)

\$50.00

## Contributor address;

City;

State;

Zip Code

112 Millington Ln Buda, TX 78610

## Principal occupation / Job title (See Instructions)

Not Employed

## Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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



**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

The Instruction Guide explains how to complete this form.

**1** Total pages Schedule A1:

14

**2** FILER NAME

Alexander (Alex) Villalobos

**3** Filer ID (Ethics Commission Filers)**4** Date

9/8/2020

**5** Full name of contributor☐ out-of-state PAC (ID#: \_\_\_\_\_)

Alison Castillo

**7** Amount of contribution (\$)

\$100.00

**6** Contributor address; City; State; Zip Code

4013 Denmark St Houston, TX 77016

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

Student Assistant

**9** Employer (See Instructions)

Date

9/8/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Raoul Belleau

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

291 Brunson Ln Wimberley, TX 78676

Principal occupation / Job title (See Instructions)

Electrical Engineer

Employer (See Instructions)

Date

9/8/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Heiko Stang

Amount of contribution (\$)

\$7.50

Contributor address; City; State; Zip Code

351 Limestone Ln Driftwood, TX 78619

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

1/27/2020

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Luis Montes

Amount of contribution (\$)

\$50.00

Contributor address; City; State; Zip Code

11220 Barns Trail Austin, TX 78754

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

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

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

15

2 FILER NAME

Alexander (Alex) Villalobos

3 Filer ID (Ethics Commission Filers)

4 Date

5/4/2020

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Tara Racine

6 Contributor address; City; State; Zip Code

291 Brunson Ln Wimberley, TX 78676

7 Amount of contribution (\$)

\$50.00

8 Principal occupation / Job title (See Instructions)

Not Employed

9 Employer (See Instructions)

Date

8/21/2020

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Gilberto Gonzalez

Contributor address; City; State; Zip Code

120 Twinleaf Ln San Antonio, TX 78213

Amount of contribution (\$)

\$1500.00

Principal occupation / Job title (See Instructions)

Realtor

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Not Employed

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 1	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/9/2020	<b>5</b> Payee name Frost Bank	
<b>6</b> Amount (\$)  \$8.00	<b>7</b> Payee address; City; State; Zip Code  PO Box 649 San Marcos, TX 78640	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule)  Fees	
	<b>(b) Description</b>  Monthly Bank Fee	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date  1/21/2020	Payee name  Fedex	
Amount (\$)  \$238.15	Payee address; City; State; Zip Code  303 N Edward Gary St., Ste C San Marcos TX 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Printing	
	Description  	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date  1/27/2020	Payee name  Lowe's	
Amount (\$)  \$31.63	Payee address; City; State; Zip Code  5753 Kyle Pkwy Kyle, TX 78640	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising	
	Description  Sign Supplies	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: <b>2</b>	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 1/28/2020	<b>5</b> Payee name Lowe's	
<b>6</b> Amount (\$)  \$15.33	<b>7</b> Payee address; City; State; Zip Code  5753 Kyle Pkwy Kyle, TX 78640	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Advertising	<b>(b)</b> Description  Supplies for Signs
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
<b>Date</b> 2/3/2020	<b>Payee name</b> Knights of Columbus	
<b>Amount (\$)</b>  \$100.00	<b>Payee address; City; State; Zip Code</b>  801 Burleson St. Kyle TX 78640	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)  Donations made by candidate	<b>Description</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
<b>Date</b> 2/3/2020	<b>Payee name</b> Pisces Seafood	
<b>Amount (\$)</b>  \$43.62	<b>Payee address; City; State; Zip Code</b>  311 N Old Hwy 81 Kyle, TX 78640	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule)  Food/ Beverage	<b>Description</b>  Volunteer Breakfast
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 3	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 2/3/2020	<b>5</b> Payee name Los Vaqueros Cafe	
<b>6</b> Amount (\$) \$38.44	<b>7</b> Payee address; City; State; Zip Code 804 W Center St Kyle TX 78640	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/ Beverage	<b>(b)</b> Description Volunteer Lunch
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/3/2020	Payee name The Home Depot	
Amount (\$) \$30.10	Payee address; City; State; Zip Code 3730 Dry Hole Rd Kyle, TX 78640	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Sign Supplies
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/6/2020	Payee name Alex Villalobos (ATM Withdrawal)	
Amount (\$) \$42.25	Payee address; City; State; Zip Code 136 Firewheel Cv Kyle TX 78640	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage	Description Snacks and Waters for Volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 4		2 FILER NAME Alexander (Alex) Villalobos		3 Filer ID (Ethics Commission Filers)	
4 Date 2/10/2020		5 Payee name The Home Depot			
6 Amount (\$) \$319.74		7 Payee address; City; State; Zip Code 3730 Dry Hole Rd Kyle, TX 78640			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Sign Supplies		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/10/2020		Payee name Lowes			
Amount (\$) \$32.45		Payee address; City; State; Zip Code 5753 Kyle Prkwy Kyle, TX 78640			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Signage		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 2/10/2020		Payee name Frost Bank			
Amount (\$) \$8.00		Payee address; City; State; Zip Code PO Box 649 San Marcos, TX 78667-0649			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Monthly Bank Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 5		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 2/10/2020		<b>5</b> Payee name Frost Bank			
<b>6</b> Amount (\$) \$2.00		<b>7</b> Payee address; City; State; Zip Code PO Box 649 San Marcos, TX 78666			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees		<b>(b)</b> Description  ATM Fees		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/20/2020		Payee name Act Blue			
Amount (\$) \$100.00		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Donation made by candidate		Description  Hays County Democratic Party		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 3/2/2020		Payee name Alex Villalobos (ATM Cash)			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 136 Firewheel Cv Kyle, TX 78640			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Advertising Food & Beverage		Description  Sign Supplies Refreshments for Volunteers		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 6		2 FILER NAME Alexander (Alex) Villalobos		3 Filer ID (Ethics Commission Filers)	
4 Date 3/2/2020		5 Payee name Walmart			
6 Amount (\$) \$30.50		7 Payee address; City; State; Zip Code 5754 Kyle Pkwy Kyle, TX 78640			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Overhead		(b) Description  Office Supplies		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 3/9/2020		Candidate / Officeholder name Frost Bank			
Amount (\$) \$8.00		Payee address; City; State; Zip Code PO Box 649 San Marcos, TX 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Monthly Bank Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 3/9/2020		Candidate / Officeholder name Frost Bank			
Amount (\$) \$2.00		Payee address; City; State; Zip Code PO Box 649 San Marcos, TX 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  ATM Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 3/9/2020		Candidate / Officeholder name Frost Bank			
Amount (\$) \$2.00		Payee address; City; State; Zip Code PO Box 649 San Marcos, TX 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  ATM Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 7	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3/30/2020	<b>5</b> Payee name Imagine Wimberley	
<b>6</b> Amount (\$)  \$108.34	<b>7</b> Payee address; City; State; Zip Code  PO Box 1506 Wimberley, TX 78676	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Donations Made By Candidate	<b>(b)</b> Description
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date  3/31/2020	Payee name  Facebook	
Amount (\$)  \$20.51	Payee address; City; State; Zip Code  1601 Willow Rd Menlo Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising	Description  Boosted Facebook Ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date  4/8/2020	Payee name  Frost Bank	
Amount (\$)  \$8.00	Payee address; City; State; Zip Code  PO Box 649 San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees	Description  Monthly Bank Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 8	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 6/1/2020	<b>5</b> Payee name Facebook	
<b>6</b> Amount (\$) \$8.24	<b>7</b> Payee address; City; State; Zip Code 1601 Willow Rd Menlow Park, Ca 94025	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising	<b>(b)</b> Description Boosted Facebook Ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name Office sought Office held		
Date 6/8/2020	Payee name Frost Bank	
Amount (\$) \$8.00	Payee address; City; State; Zip Code PO Box 649 San Marcos, TX 78666	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Monthly Bank Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name Office sought Office held		
Date 6/22/2020	Payee name Facebook	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1601 Willow Rd Menlow Park, CA 94025	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Boosted Facebook Ads
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH         Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 9		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 6/24/2020		<b>5</b> Payee name Facebook			
<b>6</b> Amount (\$) \$50.00		<b>7</b> Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025			
<b>8</b>  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Boosted Facebook Ads		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 6/30/2020		Payee name Facebook			
Amount (\$) \$53.50		Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Boosted Facebook Ads		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 7/27/2020		Payee name Ace Printing			
Amount (\$) \$1746.29		Payee address; City; State; Zip Code 7807 Doncaster Austin, TX 78745			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing		Description Signs		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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 F1: 10		2 FILER NAME Alexander (Alex) Villalobos		3 Filer ID (Ethics Commission Filers)	
4 Date 7/28/2020		5 Payee name TNT Strategies			
6 Amount (\$) \$350.00		7 Payee address; City; State; Zip Code 4111 Ave A #107 Austin, TX 78751			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consulting		(b) Description  Data & Rolls		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7/31/2020		Payee name Facebook			
Amount (\$) \$24.24		Payee address; City; State; Zip Code 1601 Willow Rd Menlow Park, CA 94025			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising		Description  Boosted Facebook Ads		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/14/2020		Payee name TNT Strategies			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 4111 Ave A#105 Austin, TX 78751			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Consultant		Description  Polling Lists		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 11	<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 8/24/2020	<b>5</b> Payee name Facebook			
<b>6</b> Amount (\$) \$75.00	<b>7</b> Payee address; 1601 Willow Rd Menlow Park, CA 94025		City;	State; Zip Code
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising		<b>(b)</b> Description Boosted Facebook Ads	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date 8/24/2020	Payee name Venmo			
Amount (\$) \$156.00	Payee address; 2211 N 1st St San Jose, CA 95131		City;	State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description J Figueroa: Web Maintenance	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date 8/24/2020	Payee name Lowe's			
Amount (\$) \$74.82	Payee address; 5753 Kyle Pwky Kyle, TX 78640		City;	State; Zip Code
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising		Description Sign Supplies	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 12		2 FILER NAME Alexander (Alex) Villalobos		3 Filer ID (Ethics Commission Filers)	
4 Date 8/27/2020		5 Payee name Wix.com			
6 Amount (\$) \$6.44		7 Payee address; City; State; Zip Code 2601 Mission St San Francisco, CA 94110			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Advertising		(b) Description  Website Expense		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 8/31/2020		Candidate / Officeholder name Office sought Office held			
Payee name Venmo					
Amount (\$) \$80.00		Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Contract Labor		Description  Lizette Gonzalez		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 8/31/2020		Candidate / Officeholder name Office sought Office held			
Payee name Facebook					
Amount (\$) \$2.34		Payee address; City; State; Zip Code 1601 Willow Rd Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising		Description  Boosted Facebook Ads		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 13	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 8/31/2020	<b>5</b> Payee name Amazon	
<b>6</b> Amount (\$) \$32.43	<b>7</b> Payee address; City; State; Zip Code 440 Terry Ave N Seattle, WA 98109	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Overhead	<b>(b)</b> Description Office Supplies
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 8/31/2020	Payee name Venmo	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Alison Castillo
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 8/31/2020	Payee name Venmo	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 2211 N 1st St San Jose, CA 95131	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Marie Drosche
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 14		2 FILER NAME Alexander (Alex) Villalobos		3 Filer ID (Ethics Commission Filers)	
4 Date 9/4/2020		5 Payee name TNT Strategies			
6 Amount (\$) \$420.00		7 Payee address; City; State; Zip Code 4111 Ave A #107 Austin, TX 78751			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Consultant		(b) Description  Data		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/8/2020		Payee name Fedex			
Amount (\$) \$812.39		Payee address; City; State; Zip Code 303 N Edward Gary St #C San Marcos, TX 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Printing		Description  Door hangers		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/8/2020		Payee name Kindle			
Amount (\$) \$10.81		Payee address; City; State; Zip Code 11700 Rock Rose Ave., Austin, TX 78758			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Other		Description  Professional Subscription		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 15		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 9/10/2020		<b>5</b> Payee name Venmo			
<b>6</b> Amount (\$) \$80.00		<b>7</b> Payee address; City; State; Zip Code 2211 N 1st St. San Jose, CA 95131			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor		<b>(b)</b> Description Lizette Gonzalez		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/10/2020		Payee name Venmo			
Amount (\$) \$70.00		Payee address; City; State; Zip Code 2211 N 1st St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Alison Castillo		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/11/2020		Payee name US Post Office			
Amount (\$) \$44.00		Payee address; City; State; Zip Code 555 Rebel Dr Kyle, TX 78640			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Postage		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 16		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 9/14/2020		<b>5</b> Payee name Venmo			
<b>6</b> Amount (\$) \$50.00		<b>7</b> Payee address; City; State; Zip Code 2211 N 1st St. San Jose, CA 95131			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Contract Labor		<b>(b)</b> Description  Alison Castillo		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/16/2020		Payee name Venmo			
Amount (\$) \$50.00		Payee address; City; State; Zip Code 211 N 1st St. San Jose, CA 95131			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Contract Labor		Description  Marie Drosche		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/17/2020		Payee name Fedex			
Amount (\$) \$249.23		Payee address; City; State; Zip Code 303 N Edward Gary St., Ste C San Marcos, TX 78666			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Printing		Description  Door Hangers		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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 F1: 17	<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 9/17/2020	<b>5</b> Payee name TNT Strategies			
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; 4111 Ave A, # 107 Austin, TX 78751		City;	State; Zip Code
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consultant		<b>(b)</b> Description Listing	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date 9/21/2020	Payee name The Home Depot			
Amount (\$) \$138.56	Payee address; 3730 Dry Hole Rd Kyle, TX 78640		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Signage Supplies	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date 9/21/2020	Payee name Venmo			
Amount (\$) \$110.00	Payee address; 2211 N 1st St. San Jose, CA 95131		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Lizette Gonzalez	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 18	<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 9/22/2020	<b>5</b> Payee name Printing Solutions Austin		
<b>6</b> Amount (\$) \$216.50	<b>7</b> Payee address; City; State; Zip Code 321 W Ben White Blvd #102 Austin, TX 78704		
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Printing		<b>(b)</b> Description  Signage
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 9/22/2020	Payee name Print This		
Amount (\$) \$116.92	Payee address; City; State; Zip Code 13330 N State Hwy 123 E Seguin, TX 78155		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Advertising		Description  Shirts
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			
Date 12/8/2019	Payee name Act Blue		
Amount (\$) \$13.83	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
Candidate / Officeholder name Office sought Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 19		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 12/15/2019		<b>5</b> Payee name Act Blue			
<b>6</b> Amount (\$) \$9.88		<b>7</b> Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees		<b>(b)</b> Description  Credit Card Donation Processing Fee		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 12/22/2019		Payee name Act Blue			
Amount (\$) \$19.75		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 1/12/2020		Payee name Act Blue			
Amount (\$) \$5.93		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 20		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 1/19/2020		<b>5</b> Payee name Act Blue			
<b>6</b> Amount (\$) \$5.93		<b>7</b> Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees		<b>(b)</b> Description  Credit Card Donation Processing Fee		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 2/2/2020		Candidate / Officeholder name Act Blue			
Amount (\$) \$10.48		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 2/9/2020		Candidate / Officeholder name Act Blue			
Amount (\$) \$33.58		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 2/9/2020		Candidate / Officeholder name Act Blue			
Amount (\$) \$33.58		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: 21	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 2/16/2020	<b>5</b> Payee name Act Blue	
<b>6</b> Amount (\$) \$10.87	<b>7</b> Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees	<b>(b)</b> Description  Credit Card Donation Processing Fee
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 2/23/2020	Payee name Act Blue	
Amount (\$) \$5.93	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees	Description  Credit Card Donation Processing Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 3/29/2020	Payee name Act Blue	
Amount (\$) \$2.28	Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees	Description  Credit Card Donation Processing Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 22		2 FILER NAME Alexander (Alex) Villalobos		3 Filer ID (Ethics Commission Filers)	
4 Date 3/22/2020		5 Payee name Act Blue			
6 Amount (\$) \$1.98		7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Credit Card Donation Processing Fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 3/3/2020		Payee name Act Blue			
Amount (\$) \$39.50		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 4/12/2020		Payee name Act Blue			
Amount (\$) \$5.93		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 23	<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 4/26/2020	<b>5</b> Payee name Act Blue			
<b>6</b> Amount (\$) \$4.26	<b>7</b> Payee address; PO Box 441146 Somerville, MA 02144-0031		City;	State; Zip Code
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees		<b>(b)</b> Description  Credit Card Donation Processing Fee	
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date 5/24/2020	Payee name Act Blue			
Amount (\$) \$2.28	Payee address; PO Box 441146 Somerville, MA 02144-0031		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				
Date 5/10/2020	Payee name Act Blue			
Amount (\$) \$3.95	Payee address; PO Box 441146 Somerville, MA 02144-0031		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate / Officeholder name Office sought Office held				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 24		2 FILER NAME Alexander (Alex) Villalobos		3 Filer ID (Ethics Commission Filers)	
4 Date 5/31/2020		5 Payee name Act Blue			
6 Amount (\$) \$1.98		7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees		(b) Description  Credit Card Donation Processing Fee		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/7/2020		Payee name Act Blue			
Amount (\$) \$19.76		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/14/2020		Payee name Act Blue			
Amount (\$) \$3.95		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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 F1: 25		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 6/21/2020		<b>5</b> Payee name Act Blue			
<b>6</b> Amount (\$) \$1.98		<b>7</b> Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees		<b>(b)</b> Description  Credit Card Donation Processing Fee		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6/28/2020		Payee name Act Blue			
Amount (\$) \$2.28		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7/12/2020		Payee name Act Blue			
Amount (\$) \$3.95		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 26	2 FILER NAME Alexander (Alex) Villalobos	3 Filer ID (Ethics Commission Filers)
4 Date 7/19/2020	5 Payee name Act Blue	
6 Amount (\$) \$9.69	7 Payee address; PO Box 441146 Somerville, MA 02144-0031	City; State; Zip Code
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Fees	(b) Description  Credit Card Donation Processing Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 7/26/2020	Payee name Act Blue	
Amount (\$) \$9.60	Payee address; PO Box 441146 Somerville, MA 02144-0031	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees	Description  Credit Card Donation Processing Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 8/2/2020	Payee name Act Blue	
Amount (\$) \$4.94	Payee address; PO Box 441146 Somerville, MA 02144-0031	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)  Fees	Description  Credit Card Donation Processing Fee
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## 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 F1: 27		<b>2</b> FILER NAME Alexander (Alex) Villalobos		<b>3</b> Filer ID (Ethics Commission Filers)	
<b>4</b> Date 8/16/2020		<b>5</b> Payee name Act Blue			
<b>6</b> Amount (\$) \$0.99		<b>7</b> Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees		<b>(b)</b> Description  Credit Card Donation Processing Fee		
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/09/2020		Payee name Act Blue			
Amount (\$) \$7.91		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/23/2020		Payee name Act Blue			
Amount (\$) \$43.46		Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031			
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule)  Fees		Description  Credit Card Donation Processing Fee		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### 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 F1: 28	<b>2</b> FILER NAME Alexander (Alex) Villalobos	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 8/30/2020	<b>5</b> Payee name Act Blue	
<b>6</b> Amount (\$) \$6.23	<b>7</b> Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144-0031	
<b>8</b>  PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule)  Fees	<b>(b)</b> Description  Credit Card Donation Processing Fee
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED