

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR: _____ FIRST: <b>Fernando</b> MI: <b>L</b> NICKNAME: _____ LAST: <b>de Urioste</b> SUFFIX: _____	<b>OFFICE USE ONLY</b> Date Received <i>October 7, 2024</i> <i>by Edna Butts</i>	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: <b>913 Nile St.</b> APT / SUITE #: _____ CITY: <b>Austin</b> STATE: <b>TX.</b> ZIP CODE: <b>78702</b>	Date Hand-delivered or Date Postmarked <i>Oct. 7, 2024</i>	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE: <b>( 512 )</b> PHONE NUMBER: <b>775-6927</b> EXTENSION: _____	Receipt # _____	Amount \$ _____
6 CAMPAIGN TREASURER NAME	MS / MRS / MR: _____ FIRST: <b>Allen</b> MI: <b>L</b> NICKNAME: _____ LAST: <b>Brooks</b> SUFFIX: _____	Date Processed _____	
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): <b>2316 Bitter Creek Dr.</b> CITY: <b>Austin</b> STATE: <b>TX</b> ZIP CODE: <b>78744</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE: <b>( 512. )</b> PHONE NUMBER: <b>410-9978</b> EXTENSION: _____		
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    Month Day Year <b>08 / 09 / 2024</b> THROUGH <b>09 / 26 / 2024</b>		
11 ELECTION	ELECTION DATE Month Day Year <b>11 / 05 / 2024</b>	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)	13 OFFICE SOUGHT (if known) <b>Austin ISD Trustee, At-Large Pos 8</b>	
14 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. 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.		
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME	COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME	COMMITTEE CAMPAIGN TREASURER ADDRESS
<b>GO TO PAGE 2</b>			

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>15 C/OH NAME</b> Fernando Lucas de Urioste		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 50,278.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 17,281.98
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 32,120.92
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18 SIGNATURE** 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

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

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


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

**OR**

**(2) Unsworn Declaration**

My name is Fernando Lucas de Urioste, and my date of birth is 12/17/1977.  
 My address is 913 Nile St, Austin, TX, 78702, U.S.A.  
(street) (city) (state) (zip code) (country)

Executed in Travis County, State of TX, on the 4th day of Oct, 2024.  
(month) (year)



Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

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

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21</b>
2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>8/28/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rachel Stone</b>	7 Amount of contribution (\$) <b>25.00</b>
6 Contributor address; City; State; Zip Code <b>913 Nile St Austin TX 78702</b>		
8 Principal occupation / Job title (See Instructions) <b>Lawyer</b>		9 Employer (See Instructions) <b>GNDC</b>
Date <b>8/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Samantha Gardner</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>7800 Lowdes Drive Austin TX 78745</b>		
Principal occupation / Job title (See Instructions) <b>CEO</b>		Employer (See Instructions) <b>Happypillar</b>
Date <b>8/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michelle Fonzi</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>309 Montopolis Dr Austin TX 78741</b>		
Principal occupation / Job title (See Instructions) <b>Landscape Designer</b>		Employer (See Instructions) <b>Michele Fonzi Designs</b>
Date <b>8/28/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Yen Tran</b>	Amount of contribution (\$)
Contributor address; City; State; Zip Code <b>6809 Wake Forest Lane Austin TX 78723</b>		
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>State of Texas</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>8/28/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Michael Sinclair</b>	7 Amount of contribution (\$)  <b>100.00</b>
6 Contributor address; City; State; Zip Code <b>2215 E51st street, Apt 203 Austin TX. 78723</b>		
8 Principal occupation / Job title (See Instructions) <b>Sales</b>		9 Employer (See Instructions) <b>Imagine Learning</b>
Date <b>8/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jason McEntire</b>	Amount of contribution (\$)  <b>50.00</b>
Contributor address; City; State; Zip Code <b>11002 Bruneau Trl Austin TX. 78754</b>		
Principal occupation / Job title (See Instructions) <b>Auto Sales</b>		Employer (See Instructions) <b>Dealership</b>
Date <b>8/29/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rebekah Cervantes</b>	Amount of contribution (\$)  <b>200.00</b>
Contributor address; City; State; Zip Code <b>po box 26478 Austin TX 78755</b>		
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>8/30/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Barb Bearden</b>	Amount of contribution (\$)  <b>100.00</b>
Contributor address; City; State; Zip Code <b>5605 Fort Benton Dr. Austin. TX 78735</b>		
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Fernando Lucas de Urioste		3 Filer ID (Ethics Commission Filers)
4 Date 9/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruce Bloom	7 Amount of contribution (\$) 250.00
6 Contributor address; City; State; Zip Code 2400 Georgian Drive Georgetown TX 78626		
8 Principal occupation / Job title (See Instructions) Self		9 Employer (See Instructions) Self
Date 9/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivia Bowen	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 2417 Harmon Road Silver Springs MD 20902		
Principal occupation / Job title (See Instructions) Coach		Employer (See Instructions) Self
Date 9/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roy Wygant	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 817 Live Oak St. Lake Charles LA 70601		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) the Cox Firm
Date 9/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charlie Hemline	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 2112 Thornton Road #A Austin TX 78704		
Principal occupation / Job title (See Instructions) Self employed		Employer (See Instructions) Charlie Hemmeline
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/08/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Leah Kelly</b> <hr/> 6 Contributor address; City; State; Zip Code <b>132 Wooden Lodge Drive Manchaca TX 78652</b>	7 Amount of contribution (\$)  <b>100.00</b>
8 Principal occupation / Job title (See Instructions) <b>Not Employed</b>		9 Employer (See Instructions) <b>Not Employe</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steven Yarak</b> <hr/> Contributor address; City; State; Zip Code <b>2013 E Cesar Chavez Apt A Austin TX 78702</b>	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Builder</b>		Employer (See Instructions) <b>Self</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Melissa McRoy Shearer</b> <hr/> Contributor address; City; State; Zip Code <b>7201 Dan Pass Austin TX 78744</b>	Amount of contribution (\$)  <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Public Defender</b>		Employer (See Instructions) <b>Travis County</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Messier</b> <hr/> Contributor address; City; State; Zip Code <b>2708 E 2nd St Austin TX 78702</b>	Amount of contribution (\$)  <b>25.00</b>
Principal occupation / Job title (See Instructions) <b>Self Employed</b>		Employer (See Instructions) <b>Self</b>
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4 Date <b>9/08/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Han Ren</b>	7 Amount of contribution (\$) <b>200.00</b>
6 Contributor address; City; State; Zip Code <b>3825 Mattie St. Austin TX 78723</b>		
8 Principal occupation / Job title (See Instructions) <b>Psychologist</b>		9 Employer (See Instructions) <b>Self</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Dinoff</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>9416 Hunter Ln Austin TX 78748</b>		
Principal occupation / Job title (See Instructions) <b>Real Estate</b>		Employer (See Instructions) <b>Capital A Housing</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Heather Pagano</b>	Amount of contribution (\$) <b>200.00</b>
Contributor address; City; State; Zip Code <b>5404 Wellington Drive Austin TX 78723</b>		
Principal occupation / Job title (See Instructions) <b>Project Manager</b>		Employer (See Instructions) <b>Pearson</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Abigail Tatow</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>309 Montopolis Drive Austin TX 78741</b>		
Principal occupation / Job title (See Instructions) <b>Realtor</b>		Employer (See Instructions) <b>Central Metro</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/08/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>William B. Knox</b>	7 Amount of contribution (\$)  <b>200.00</b>
	6 Contributor address; City; State; Zip Code <b>4013 Margarita St Austin TX 78723</b>	
8 Principal occupation / Job title (See Instructions) <b>Research Associate Professor</b>		9 Employer (See Instructions) <b>UT Austin</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Evan Gardner</b>	Amount of contribution (\$)  <b>25.00</b>
	Contributor address; City; State; Zip Code <b>7800 Lowdes Dr Austin TX 78745</b>	
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Josh Rudow</b>	Amount of contribution (\$)  <b>100.00</b>
	Contributor address; City; State; Zip Code <b>2204 Robert Browning St. Austin TX 78723</b>	
Principal occupation / Job title (See Instructions) <b>Urban Planner</b>		Employer (See Instructions) <b>City of Austin</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Tom Wald</b>	Amount of contribution (\$)  <b>25.00</b>
	Contributor address; City; State; Zip Code <b>4016 Maplewood Ave Austin TX 78722</b>	
Principal occupation / Job title (See Instructions) <b>Executive Director</b>		Employer (See Instructions) <b>Red Line Parkway Initiative</b>

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

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4 Date <b>9/08/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Daniel Escobar</b>	7 Amount of contribution (\$) <b>5.00</b>
6 Contributor address; City; State; Zip Code <b>8607 United Kingdom Dr. Austin TX. 78748</b>		
8 Principal occupation / Job title (See Instructions) <b>Not Employed</b>		9 Employer (See Instructions) <b>Not Employed</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Quentin Perry</b>	Amount of contribution (\$) <b>170.00</b>
Contributor address; City; State; Zip Code <b>91 RED RIVER ST, Apt 2913 Austin TX. 78701</b>		
Principal occupation / Job title (See Instructions) <b>Group Business Affairs Director</b>		Employer (See Instructions) <b>Hailstorm Business Affairs</b>
Date <b>9/08/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Olivia Workman</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>7624 TECOMA CIR Austin TX 78735</b>		
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/09/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Hannah Lantos</b>	Amount of contribution (\$) <b>20.00</b>
Contributor address; City; State; Zip Code <b>5611 5th st NW apt 14 Washington DC 20011</b>		
Principal occupation / Job title (See Instructions) <b>Researcher</b>		Employer (See Instructions) <b>Child Trends</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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4 Date <b>9/09/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kathryn Clarke</b>	7 Amount of contribution (\$) <b>25.00</b>
6 Contributor address; City; State; Zip Code <b>2034 Palmer Ave Larchmont NY 10538</b>		
8 Principal occupation / Job title (See Instructions) <b>Fundraising communications</b>		9 Employer (See Instructions) <b>FoodCorps</b>
Date <b>9/09/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Magelly Serrano</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>4704 Banister Lane Austin TX 78745</b>		
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/11/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sarah Stephens</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>6884 76th Avenue Salem OR 97317</b>		
Principal occupation / Job title (See Instructions) <b>Director</b>		Employer (See Instructions) <b>Nonprofit</b>
Date <b>9/12/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sylvia Sowles</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>2 Walnut Hill Rd North Yarmouth ME. 4097</b>		
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/16/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ann Teich</b>	7 Amount of contribution (\$) <b>50.00</b>
6 Contributor address; City; State; Zip Code <b>9201 QUAIL HILL CIR Austin TX 78758</b>		
8 Principal occupation / Job title (See Instructions) <b>Not Employed</b>		9 Employer (See Instructions) <b>Not Employed</b>
Date <b>9/17/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Tatianna Cannon</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>118 NW 31st OKC OK 73118</b>		
Principal occupation / Job title (See Instructions) <b>Fundraising and PA</b>		Employer (See Instructions) <b>Teach for America</b>
Date <b>9/17/2020</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Christopher Chaupin</b>	Amount of contribution (\$) <b>250.00</b>
Contributor address; City; State; Zip Code <b>11018 Avenu Malkenu Ave Houston TX 77043</b>		
Principal occupation / Job title (See Instructions) <b>IT Manager</b>		Employer (See Instructions) <b>RPMG</b>
Date <b>9/19/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Drew Edge</b>	Amount of contribution (\$) <b>50.00</b>
Contributor address; City; State; Zip Code <b>5305 Guadalupe St, Unit B Austin TX 78751</b>		
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>McGinnis Lochridge</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21</b>
2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/20/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Eric Goff</b>	7 Amount of contribution (\$)  <b>250.00</b>
	6 Contributor address; City; State; Zip Code <b>404 Rio Grande #403 Austin TX 78701</b>	
8 Principal occupation / Job title (See Instructions) <b>Owner</b>		9 Employer (See Instructions) <b>Eric Winters Goff LLC</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Brenda Blair</b>	Amount of contribution (\$)  <b>50.00</b>
	Contributor address; City; State; Zip Code <b>2208 E 13th St Austin TX 78702</b>	
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kelly Gagnon</b>	Amount of contribution (\$)  <b>100.00</b>
	Contributor address; City; State; Zip Code <b>1710 E 40th St Austin TX 78722</b>	
Principal occupation / Job title (See Instructions) <b>Principal Planner</b>		Employer (See Instructions) <b>City of Austin</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephen Ratcliff</b>	Amount of contribution (\$)  <b>100.00</b>
	Contributor address; City; State; Zip Code <b>5009 Calabria Ct 6037 Austin TX 78738</b>	
Principal occupation / Job title (See Instructions) <b>Physician</b>		Employer (See Instructions) <b>US Anesthesia Partners</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21</b>
2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/22/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Discovery Gerdes</b>	7 Amount of contribution (\$) <b>25.00</b>
6 Contributor address; City; State; Zip Code <b>17104 Fitzgerald Ln Round Rock TX 78664</b>		
8 Principal occupation / Job title (See Instructions) <b>Program Mgr</b>		9 Employer (See Instructions) <b>Oracle</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Lynn Cowles</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>2405 Little John Ln Austin TX 78704</b>		
Principal occupation / Job title (See Instructions) <b>Manager</b>		Employer (See Instructions) <b>Every Texan</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Greg Anderson</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>301 West Avenue, 3302 Austin TX 78701</b>		
Principal occupation / Job title (See Instructions) <b>Affordable Homeownership</b>		Employer (See Instructions) <b>Austin Habitat for Humanity</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Steve Gonzales</b>	Amount of contribution (\$) <b>100.00</b>
Contributor address; City; State; Zip Code <b>8000 Weldon Springs Ct Austin TX 78726</b>		
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>Self</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21</b>
2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/22/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Emily George</b>	7 Amount of contribution (\$) <b>100.00</b>
	6 Contributor address; City; State; Zip Code <b>2704 Kerrybrook Lane Austin TX 78757</b>	
8 Principal occupation / Job title (See Instructions) <b>Preschool Teacher</b>		9 Employer (See Instructions) <b>Covenant Presbyterian Church</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Lawrence Gonzales</b>	Amount of contribution (\$) <b>25.00</b>
	Contributor address; City; State; Zip Code <b>1076 Verbena Dr Austin TX 78750</b>	
Principal occupation / Job title (See Instructions) <b>Government Employee</b>		Employer (See Instructions) <b>State of Texas</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephen Kirchen</b>	Amount of contribution (\$) <b>20.00</b>
	Contributor address; City; State; Zip Code <b>7305 Loganberry Dr Austin TX 78745</b>	
Principal occupation / Job title (See Instructions) <b>Software</b>		Employer (See Instructions) <b>Self</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Taren Hodges</b>	Amount of contribution (\$) <b>10.00</b>
	Contributor address; City; State; Zip Code <b>4406 Garnett St Austin TX 78745</b>	
Principal occupation / Job title (See Instructions) <b>Organizer</b>		Employer (See Instructions) <b>Education Austin</b>
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21</b>
2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/22/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Brooke Beasley</b>	7 Amount of contribution (\$) <b>20.00</b>
6 Contributor address; City; State; Zip Code <b>9101 La Cresada Dr, Apt. 2732 Austin TX 78749</b>		
8 Principal occupation / Job title (See Instructions) <b>Operations Manager</b>		9 Employer (See Instructions) <b>Hello World Computer Science</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stan Pipkin</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>907 Gullett st. Austin TX 78702</b>		
Principal occupation / Job title (See Instructions) <b>CEO</b>		Employer (See Instructions) <b>Lighthouse Solar</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jared Lindauer</b>	Amount of contribution (\$) <b>125.00</b>
Contributor address; City; State; Zip Code <b>4012 Crescent Dr Austin TX 78722</b>		
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>Lindauer Law Group PLLC</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Abigail Tatkov</b>	Amount of contribution (\$) <b>25.00</b>
Contributor address; City; State; Zip Code <b>309 Montopolis Drive Austin TX 78741</b>		
Principal occupation / Job title (See Instructions) <b>Realtor</b>		Employer (See Instructions) <b>Central Metro</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/22/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alex Radtke</b>	7 Amount of contribution (\$) <b>50.00</b>
	6 Contributor address; City; State; Zip Code <b>1516 Villanova Dr Austin TX 78757</b>	
8 Principal occupation / Job title (See Instructions) <b>Affordable Housing</b>		9 Employer (See Instructions) <b>City of Austin</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nida Heston</b>	Amount of contribution (\$) <b>25.00</b>
	Contributor address; City; State; Zip Code <b>1307 Canon Yeomans Trail Austin TX 78748</b>	
Principal occupation / Job title (See Instructions) <b>Social Worker</b>		Employer (See Instructions) <b>Social Worker</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Minda Anderson</b>	Amount of contribution (\$) <b>25.00</b>
	Contributor address; City; State; Zip Code <b>3414 Dunliegh Dr Austin TX 78745</b>	
Principal occupation / Job title (See Instructions) <b>Librarian</b>		Employer (See Instructions) <b>Austin ISD</b>
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sue Gail</b>	Amount of contribution (\$) <b>25.00</b>
	Contributor address; City; State; Zip Code <b>1109 E 10th St Austin TX 78702</b>	
Principal occupation / Job title (See Instructions) <b>Analyst</b>		Employer (See Instructions) <b>Austin Energy</b>

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Fernando Lucas de Urioste</b>				3 Filer ID (Ethics Commission Filers)
4 Date <b>9/22/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kathy Sokolic</b>	7 Amount of contribution (\$) <b>100.00</b>		
6 Contributor address; City; State; Zip Code <b>4636 Ruiz St Austin TX 78723</b>				
8 Principal occupation / Job title (See Instructions) <b>Realtor</b>		9 Employer (See Instructions) <b>Realty Austin</b>		
Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephanie K. Davis</b>	Amount of contribution (\$) <b>50.00</b>		
Contributor address; City; State; Zip Code <b>7206 Lamplight Ln Austin TX 78731</b>				
Principal occupation / Job title (See Instructions) <b>Nurse Practitioner</b>		Employer (See Instructions) <b>Stephanie Davis</b>		
Date <b>9/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alice Woods</b>	Amount of contribution (\$) <b>50.00</b>		
Contributor address; City; State; Zip Code <b>1805 South 3rd Street Austin TX 78704</b>				
Principal occupation / Job title (See Instructions) <b>Consultant</b>		Employer (See Instructions) <b>Broadleaf Community Consulting</b>		
Date <b>9/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mary Whittle</b>	Amount of contribution (\$) <b>250.00</b>		
Contributor address; City; State; Zip Code <b>4513 Spanish Oak Trail Austin TX 78731</b>				
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>Guerrero Whittle</b>		
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 21
2 FILER NAME Fernando Lucas de Urioste		3 Filer ID (Ethics Commission Filers)
4 Date 9/23/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skyler Korgel	7 Amount of contribution (\$) 8.00
6 Contributor address; City; State; Zip Code 4803 Bundyhill Dr Austin TX 78723		
8 Principal occupation / Job title (See Instructions) Legislative Director		9 Employer (See Instructions) Texas House of Representatives
Date 9/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ezequiel Cotler	Amount of contribution (\$) 50.00
Contributor address; City; State; Zip Code 6516 East Hill Drive Austin TX 78731		
Principal occupation / Job title (See Instructions) Billing		Employer (See Instructions) Shalom Austin
Date 9/23/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy Raub	Amount of contribution (\$) 100.00
Contributor address; City; State; Zip Code 113 Lost Creek Drive Portland TX 78374		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Raub Law Firm
Date 9/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Margaret Heidrick	Amount of contribution (\$) 125.00
Contributor address; City; State; Zip Code 6100 Hogan Austin TX 78741		
Principal occupation / Job title (See Instructions) Producer		Employer (See Instructions) Self
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/25/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Sergio Davila</b> <hr/> 6 Contributor address; City; State; Zip Code <b>604 Boise Laredo TX 78041</b>	7 Amount of contribution (\$)  <b>25.00</b>
8 Principal occupation / Job title (See Instructions) <b>Attorney</b>		9 Employer (See Instructions) <b>Self</b>
Date <b>9/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Athena Alexander</b> <hr/> Contributor address; City; State; Zip Code <b>1528 Homewood Circle Round Rock TX 78665</b>	Amount of contribution (\$)  <b>500.00</b>
Principal occupation / Job title (See Instructions) <b>IT</b>		Employer (See Instructions) <b>City of Austin</b>
Date <b>9/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Ben Mandelkern</b> <hr/> Contributor address; City; State; Zip Code <b>136 Walker Hill Road South Royalton VT 5068</b>	Amount of contribution (\$)  <b>25.00</b>
Principal occupation / Job title (See Instructions) <b>Manager</b>		Employer (See Instructions) <b>Sound Postings LLC</b>
Date <b>9/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Amy Young</b> <hr/> Contributor address; City; State; Zip Code <b>348 Nayatt Road Barrington RI 2806</b>	Amount of contribution (\$)  <b>25.00</b>
Principal occupation / Job title (See Instructions) <b>Advocate</b>		Employer (See Instructions) <b>CAA</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/26/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Richard Canzonetti</b>	7 Amount of contribution (\$)  <b>150.00</b>
	6 Contributor address; City; State; Zip Code <b>22 Lambert Common Wilton CT 6897</b>	
8 Principal occupation / Job title (See Instructions) <b>Not Employed</b>		9 Employer (See Instructions) <b>Not Employed</b>
Date <b>9/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gail Stein</b>	Amount of contribution (\$)  <b>250.00</b>
	Contributor address; City; State; Zip Code <b>69 Longwood Av. apt 1102 Brookline MA 2446</b>	
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Edith Canzonetti</b>	Amount of contribution (\$)  <b>250.00</b>
	Contributor address; City; State; Zip Code <b>3 Top Sail rd Norwalk CT 6853</b>	
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rachel Stone</b>	Amount of contribution (\$)  <b>5000.00</b>
	Contributor address; City; State; Zip Code <b>913 Nile St. Austin TX 78702</b>	
Principal occupation / Job title (See Instructions) <b>Lawyer</b>		Employer (See Instructions) <b>GNDC</b>

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

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/26/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Julie Potts</b> 6 Contributor address; City; State; Zip Code <b>4351 Mueller Ln Prosper TX</b>	7 Amount of contribution (\$) <b>150.00</b>
8 Principal occupation / Job title (See Instructions) <b>CEO</b>		9 Employer (See Instructions) <b>Squibb Taylor</b>
Date <b>9/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Judith Berg</b> Contributor address; City; State; Zip Code <b>344 Pinecrest Beach Dr, Barnstable County, MA 2536</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/23/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Deborah Hanson</b> Contributor address; City; State; Zip Code <b>906 North Riviera Cir Cedar Park TX 78613</b>	Amount of contribution (\$) <b>100.00</b>
Principal occupation / Job title (See Instructions) <b>Adjunct Professor</b>		Employer (See Instructions) <b>ACC</b>
Date <b>8/26/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>Rachel Stone</b> Contributor address; City; State; Zip Code <b>913 Nile St Austin TX 78702</b>	Amount of contribution (\$) <b>35.00</b>
Principal occupation / Job title (See Instructions) <b>Lawyer</b>		Employer (See Instructions) <b>GNDC</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/03/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Fernando Urioste</b> <hr/> 6 Contributor address; City; State; Zip Code <b>1041 Laguna Springs Dr Weston FL 33326</b>	7 Amount of contribution (\$)  <b>5,000.00</b>
8 Principal occupation / Job title (See Instructions) <b>Not Employed</b>		9 Employer (See Instructions) <b>Not Employed</b>
Date <b>9/10/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Education Austin</b> <hr/> Contributor address; City; State; Zip Code <b>8716 N. Mopac Expressway Austin TX 78759</b>	Amount of contribution (\$)  <b>15,000</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>9/16/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jose de Urioste</b> <hr/> Contributor address; City; State; Zip Code <b>993 Jep Wheeler Rd. Woodstock GA. 30188</b>	Amount of contribution (\$)  <b>1,000</b>
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date <b>9/17/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alejandra de Urioste</b> <hr/> Contributor address; City; State; Zip Code <b>One Hanson Place, Apt 18A Brooklyn NY 11243</b>	Amount of contribution (\$)  <b>1,000</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>21</b>
2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>9/19/2024</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Schlagel</b>	7 Amount of contribution (\$) <b>5,000.00</b>
6 Contributor address; City; State; Zip Code <b>606 Arcadia Pl San Antonio TX 78209</b>		
8 Principal occupation / Job title (See Instructions) <b>President</b>		9 Employer (See Instructions) <b>NRC Group, L.L.C.</b>
Date <b>9/19/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Susan Stone</b>	Amount of contribution (\$) <b>10,000</b>
Contributor address; City; State; Zip Code <b>2 Old Town Hwy, Unit 23. East Haven CT. 06512</b>		
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions) <b>Not Employed</b>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

## SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: <b>1</b>	
2 FILER NAME <b>Fernando Lucas de Urioste</b>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date <b>9/05/2024</b>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Martin J. Cirkiel</b>	8 Amount of Contribution \$ <b>640.00</b>	9 In-kind contribution description <b>Campaign T-Shirts</b>
7 Contributor address; City; State; Zip Code <b>1901 E. Palm Valley Blvd., Round Rock, TX 78664</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		11 Employer (FOR NON-JUDICIAL)(See Instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Date <b>9/22/2024</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Shawn Cirkiel</b>	Amount of Contribution \$ <b>500.00</b>	In-kind contribution description <b>Food discount</b>
Contributor address; City; State; Zip Code <b>1745 W Anderson Ln. Ste 600, Austin, TX 78757</b>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | 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: 4	<b>2</b> FILER NAME Fernando Lucas de Urioste	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 9/07/2024	<b>5</b> Payee name Texas Democratic Party	
<b>6</b> Amount (\$) 1,100	<b>7</b> Payee address; 314 Highland Blvd	City; State; Zip Code Austin TX 78752
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead	<b>(b)</b> Description VAN access
	<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 9/11/2024	Payee name Tico Mendoza Studios	
Amount (\$) 150.00	Payee address; 10607 Double Tree Cove	City; State; Zip Code Austin TX 78750
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Photography
	<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 9/19/2024	Payee name The Craft Advocate	
Amount (\$) 2,525.00	Payee address; 7210 Fred Morse Dr.	City; State; Zip Code Austin TX 78723
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Graphic design, website base
	<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

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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: <b>4</b>	2 FILER NAME <b>Fernando Lucas de Urioste</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>9/10/24</b>	5 Payee name <b>Empower</b>
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6 Amount (\$) <b>10.00</b>	7 Payee address; <b>2800 Royal Ave, Suite 204</b>	City; <b>Madison</b>	State; <b>Wisconsin</b>	Zip Code <b>53713</b>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Advertising Expense</b>	(b) Description <b>Voter contact and canvasing</b>
	(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
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Date <b>9/18/2024</b>	Payee name <b>CheckMark Typesetting</b>
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Amount (\$) <b>5,171.06</b>	Payee address; <b>3217 N. IH 35</b>	City; <b>Austin</b>	State; <b>TX</b>	Zip Code <b>78722</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>Yard signs</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	Candidate / Officeholder name	Office sought	Office held
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Date <b>9/24/2024</b>	Payee name <b>CheckMark Typesetting</b>
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Amount (\$) <b>5,139.45</b>	Payee address; <b>3217 N. IH 35</b>	City; <b>Austin</b>	State; <b>TX</b>	Zip Code <b>78722</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>Road signs</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	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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: 4	<b>2</b> FILER NAME Fernando Lucas de Urioste	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 9/22/2024	<b>5</b> Payee name Backspace - Anderson
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<b>6</b> Amount (\$) 1,526.44	<b>7</b> Payee address; 1745 W Anderson Ln. Ste 600.	City; Austin	State; TX	Zip Code 78757
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description Food, drinks, and service
	<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
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Date 8/30/2024	Payee name Triaz Digital Printing LLC
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Amount (\$) 184.97	Payee address; 2013 Wells Branch Pkwy Suit 307	City; Austin	State; TX	Zip Code 78728
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Push cards
	<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
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Date 9/19/2024	Payee name Frost Bank
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Amount (\$) 30.00	Payee address; 1200 Barbara Jordan Blvd Suite 200	City; Austin	State; TX	Zip Code 78723
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Wire Transfer Fees
	<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
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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>4</b>	<b>2</b> FILER NAME <b>Fernando Lucas de Urioste</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/26/2024</b>	<b>5</b> Payee name <b>ActBlue</b>	
<b>6</b> Amount (\$) <b>180.16</b>	<b>7</b> Payee address; City; State; Zip Code <b>P.O. Box 441146 Somerville MA 02144-0031</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Fees</b>	<b>(b)</b> Description <b>Processing Fees</b>
	<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 <b>9/12/2024</b>	Payee name <b>The Craft Advocate</b>	
Amount (\$) <b>1000</b>	Payee address; City; State; Zip Code <b>7210 Fred Morse Dr. Austin TX 7877223</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>Graphic design, website maintenance</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	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	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

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# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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 G: <b>1</b>	<b>2</b> FILER NAME <b>Fernando Lucas de Urioste</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>9/08/2024</b>	<b>5</b> Payee name <b>Costco</b>	
<b>6</b> Amount (\$) <b>264.90</b> <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City: State: Zip Code <b>4301 W William Cannon Dr BLDG A100 Austin TX 78749</b>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Food/Beverage</b>	<b>(b)</b> Description <b>Chips, snacks, sodas, beer.</b>
	<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 (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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 (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>		