

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME Sayda V. Morales		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 60
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 5347
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 819.91
	4. TOTAL POLITICAL EXPENDITURES	\$ 6908.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 7067.98
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

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.

Sayda V. Morales

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 Sayda Morales, and my date of birth is 02/28/93.

My address is 10434 Green Lake Drive, San Antonio, TX, 78223, USA.
(street) (city) (state) (zip code) (country)

Executed in Bexar County, State of Texas, on the 7th day of October, 2024.
(month) (year)

Sayda V. Morales

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Sayda V. Morales

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5287
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 6088.59
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 type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/05/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney Hanna	7 Amount of contribution (\$) 50
6 Contributor address; City; State; Zip Code 942 W. 42nd Street, Houston, TX 77018-5312		
8 Principal occupation / Job title (See Instructions) Assistant Professor		9 Employer (See Instructions) Relay Graduate School of Education
Date 07/10/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cristina Flores	Amount of contribution (\$) 50
Contributor address; City; State; Zip Code 4515 Meredith Woods St, San Antonio, TX 78249		
Principal occupation / Job title (See Instructions) Singer		Employer (See Instructions) Cristina Flores
Date 07/10/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valentina Fernandez	Amount of contribution (\$) 30
Contributor address; City; State; Zip Code 1135 Lavaur Ct, Kissimmee, FL 34759		
Principal occupation / Job title (See Instructions) Policy Project Manager		Employer (See Instructions) City of SA
Date 07/11/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christina Martinez	Amount of contribution (\$) 20
Contributor address; City; State; Zip Code 325 Hammond Ave, San Antonio, TX 78210		
Principal occupation / Job title (See Instructions) Non profit		Employer (See Instructions) United way of San Antonio and Bexar county
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/16/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amado Casanova 6 Contributor address; City; State; Zip Code 2131 Silver Mountain, San Antonio, TX 78264	7 Amount of contribution (\$) 80
8 Principal occupation / Job title (See Instructions) Chef		9 Employer (See Instructions) Amado Casanova
Date 07/16/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cecilia Martinez Contributor address; City; State; Zip Code 210 Vanderheck St, 2 San Antonio, TX 78209	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/16/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Misty Garcia Contributor address; City; State; Zip Code 2810 Babcock Rd , 1256 San Antonio, TX 78229	Amount of contribution (\$) 5
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) KIPP
Date 07/18/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanessa Vasquez Contributor address; City; State; Zip Code 307 Pinewood Ln San Antonio, TX 78216	Amount of contribution (\$) 35
Principal occupation / Job title (See Instructions) Enterprise Technical Learning Program Advisor		Employer (See Instructions) GDIT

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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/20/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savannah McDonough <hr/> 6 Contributor address; City; State; Zip Code 310 Channing Ave, San Antonio, TX 78210	7 Amount of contribution (\$) 70
8 Principal occupation / Job title (See Instructions) Assistant Principal		9 Employer (See Instructions) KIPP
Date 07/21/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maria Head <hr/> Contributor address; City; State; Zip Code 724 Walder Trail, San Antonio, TX 78260	Amount of contribution (\$) 80
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/22/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Billy McDonough <hr/> Contributor address; City; State; Zip Code 4501 Snell Ave. #906, San Jose, CA 95136	Amount of contribution (\$) 10
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) High School
Date 07/23/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Natalee Wilding <hr/> Contributor address; City; State; Zip Code 3663 Truth Ln., Magna, UT 84044	Amount of contribution (\$) 25
Principal occupation / Job title (See Instructions) Legal Assistant		Employer (See Instructions) Mikas Law Group
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/23/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paul Christopherson 6 Contributor address; City; State; Zip Code PO Box 1658, Litchfield, CT 06759	7 Amount of contribution (\$) 327
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date 07/26/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuria Diallo Padro Contributor address; City; State; Zip Code 9714 Via Belcara, Apt 101, San Antonio, TX 78240	Amount of contribution (\$) 20
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) NAMI GSA
Date 07/26/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maira Carrier Contributor address; City; State; Zip Code 11510 Camp Real Ln, San Antonio, TX 78253	Amount of contribution (\$) 30
Principal occupation / Job title (See Instructions) Non Profit		Employer (See Instructions) Maya's Love
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amanda Sanchez Contributor address; City; State; Zip Code 9214 Saucedo, Helotes, TX 78023	Amount of contribution (\$) 30
Principal occupation / Job title (See Instructions) Operations Director		Employer (See Instructions) JMS
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/27/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eric Rempel <hr/> 6 Contributor address; City; State; Zip Code 4606 Rock Elm Woods, San Antonio, TX 78249	7 Amount of contribution (\$) 5
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) ER Media
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chris Holben <hr/> Contributor address; City; State; Zip Code 111 Pinewood Lane, San Antonio, TX 78216	Amount of contribution (\$) 20
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Gonzales <hr/> Contributor address; City; State; Zip Code 802 utopia, San Antonio, TX 78223	Amount of contribution (\$) 55
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Project permitting
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daiana Lambrecht <hr/> Contributor address; City; State; Zip Code 415 Mary Louise dr, San Antonio, TX 78201	Amount of contribution (\$) 110
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Futuro SA
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/27/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dan Brewer <hr/> 6 Contributor address; City; State; Zip Code 726 Cravens Ave, San Antonio, TX 78223-1526	7 Amount of contribution (\$) 20
8 Principal occupation / Job title (See Instructions) Project Management		9 Employer (See Instructions) Bexar County
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Janell Guzman <hr/> Contributor address; City; State; Zip Code 5603 Cross Pond, San Antonio, TX 78249	Amount of contribution (\$) 25
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) USAA
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Corey Hoobler <hr/> Contributor address; City; State; Zip Code 4046 Miho, San Antonio, TX 78223	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) East Central ISD
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sara Villarreal <hr/> Contributor address; City; State; Zip Code 123 Park Drive, San Antonio, TX 78212-2506	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/27/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giselle Villalpando <hr/> 6 Contributor address; City; State; Zip Code 333 W Cevallos Apt 1230, San Antonio, TX 78204	7 Amount of contribution (\$) 25
8 Principal occupation / Job title (See Instructions) Communications Manager		9 Employer (See Instructions) UTSA
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace Garza <hr/> Contributor address; City; State; Zip Code 115 Spruce Breeze, San Antonio, TX 78245	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) NISD
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lauren Rasheed <hr/> Contributor address; City; State; Zip Code 159 Park Row, San Antonio, TX 78204	Amount of contribution (\$) 10
Principal occupation / Job title (See Instructions) Development Events Assistant		Employer (See Instructions) KIPP Texas Public Schools
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dana Wrann <hr/> Contributor address; City; State; Zip Code 517 San Angelo, San Antonio, TX 78212	Amount of contribution (\$) 5
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Leadership SAISD
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/27/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christina Martinez <hr/> 6 Contributor address; City; State; Zip Code 325 Hammond Ave, San Antonio, TX 78210	7 Amount of contribution (\$) 10
8 Principal occupation / Job title (See Instructions) Case Manager Americorps		9 Employer (See Instructions) International Rescue Committee
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacob Lopez <hr/> Contributor address; City; State; Zip Code 1930 W Mulberry Avenue, San Antonio, TX 78201	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions) Analyst		Employer (See Instructions) Hubspot
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) April Monterrosa <hr/> Contributor address; City; State; Zip Code 2607 Misty Spray Dr., San Antonio, TX 78224	Amount of contribution (\$) 300
Principal occupation / Job title (See Instructions) Publisher		Employer (See Instructions) April Monterrosa
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis Gault <hr/> Contributor address; City; State; Zip Code 20 River Terr, Manhattan, NY 10282	Amount of contribution (\$) 20
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) NYC DOE
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/27/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Melissa Cabello Havrda	7 Amount of contribution (\$) 10
6 Contributor address; City; State; Zip Code 8518 Vortsa Ledge, San Antonio, TX 78251		
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Law Office of MCH
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maricela Castillo	Amount of contribution (\$) 40
Contributor address; City; State; Zip Code 3615 skylark, San Antonio, TX 78210		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) REMAX
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kizzie Calhoun	Amount of contribution (\$) 30
Contributor address; City; State; Zip Code 4815 Vista Fairway, San Antonio, TX 78244		
Principal occupation / Job title (See Instructions) Educator		Employer (See Instructions) Essence
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia Noriega	Amount of contribution (\$) 40
Contributor address; City; State; Zip Code 910 Persian Pass, San Antonio, TX 78260		
Principal occupation / Job title (See Instructions) Product Mgr		Employer (See Instructions) H-E-B
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/27/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholas Cruz	7 Amount of contribution (\$) 20
6 Contributor address; City; State; Zip Code 603 Edison Ave, Bronx, NY 10465		
8 Principal occupation / Job title (See Instructions) Organizer		9 Employer (See Instructions) UFT
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Gomez	Amount of contribution (\$) 30
Contributor address; City; State; Zip Code 25802 Dull Knife Trl San Antonio, TX 78255		
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Self
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vanessa Vasquez	Amount of contribution (\$) 20
Contributor address; City; State; Zip Code 307 Pinewood Ln, San Antonio, TX 78216		
Principal occupation / Job title (See Instructions) Enterprise Technical Learning Program Advisor		Employer (See Instructions) GDIT
Date 07/27/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nuria Diallo Padro	Amount of contribution (\$) 30
Contributor address; City; State; Zip Code 9714 Via Belcara, Apt 101, San Antonio, TX 78240		
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) NAMI GSA

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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 07/27/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denise Blaz <hr/> 6 Contributor address; City; State; Zip Code 11115 Janet Lee Dr, San Antonio, TX 78230	7 Amount of contribution (\$) 25
8 Principal occupation / Job title (See Instructions) Communications Coordinator		9 Employer (See Instructions) Alamo Colleges
Date 07/28/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca Greenblatt <hr/> Contributor address; City; State; Zip Code 108 Ardsley Dr, Syracuse, NY 13214	Amount of contribution (\$) 25
Principal occupation / Job title (See Instructions) Assistant Professor		Employer (See Instructions) SUNY Upstate Medical University
Date 08/05/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney Hanna <hr/> Contributor address; City; State; Zip Code 942 W. 42nd Street, Houston, TX 77018-5312	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/14/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorena Pulido <hr/> Contributor address; City; State; Zip Code 1602 Sunbend Fls, San Antonio, TX 78224	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions) PR		Employer (See Instructions) SAISD
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 08/20/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Demonte Alexander <hr/> 6 Contributor address; City; State; Zip Code 28844 Crowley Creek, San Antonio, TX 78260	7 Amount of contribution (\$) 250
8 Principal occupation / Job title (See Instructions) Information Technology		9 Employer (See Instructions) DOCUmentation
Date 08/24/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonnie Salas <hr/> Contributor address; City; State; Zip Code 4527 Territory, San Antonio, TX 78223	Amount of contribution (\$) 25
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) SA Brooks
Date 08/25/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danielle Espinoza <hr/> Contributor address; City; State; Zip Code 4618 Pecan Grove, San Antonio, TX 78222-3525	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Lustrous Public Relations
Date 08/26/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Antoinette Flores <hr/> Contributor address; City; State; Zip Code 14318 Elkhorn Crest, San Antonio, TX 78253	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 08/28/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rebecca Greenblatt <hr/> 6 Contributor address; City; State; Zip Code 108 Ardsley Dr, Syracuse, NY 13214	7 Amount of contribution (\$) 25
8 Principal occupation / Job title (See Instructions) Assistant Professor		9 Employer (See Instructions) SUNY Upstate Medical University
Date 08/28/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bianca Ramirez <hr/> Contributor address; City; State; Zip Code 1540 W Bitters Rd, 1613, San Antonio, TX 78248	Amount of contribution (\$) 10
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) VA Health System
Date 08/29/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cristina Flores <hr/> Contributor address; City; State; Zip Code 4515 Meredith Woods St, San Antonio, TX 78249	Amount of contribution (\$) 10
Principal occupation / Job title (See Instructions) Singer		Employer (See Instructions) Freelance
Date 08/30/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adela Tamayo <hr/> Contributor address; City; State; Zip Code 31715 Camino del Rey, Los Fresnos, TX 78566	Amount of contribution (\$) 30
Principal occupation / Job title (See Instructions) Student worker/adjunct		Employer (See Instructions) Ollu/alamo colleges
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

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: 14
2 FILER NAME Sayda V. Morales		3 Filer ID (Ethics Commission Filers)
4 Date 08/30/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy West <hr/> 6 Contributor address; City; State; Zip Code 1573 Pullan Avenue Cincinnati, OH 45223	7 Amount of contribution (\$) 100
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) National Center for Civil and Human Rights
Date 09/05/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitney Hanna <hr/> Contributor address; City; State; Zip Code 942 W. 42nd Street, Houston, TX 77018-5312	Amount of contribution (\$) 50
Principal occupation / Job title (See Instructions) Assistant Professor		Employer (See Instructions) Relay Graduate School of Education
Date 09/19/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: 00088924) Families for Education and Opportunity <hr/> Contributor address; City; State; Zip Code 415 Mary Louise Drive, San Antonio, TX 78201	Amount of contribution (\$) 2500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr/> 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

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: 5	2 FILER NAME Sayda V. Morales	3 Filer ID (Ethics Commission Filers)
4 Date 07/08/24	5 Payee name Erica Rempel LLC	
6 Amount (\$) 324	7 Payee address; City; State; Zip Code 4606 Rock Elm Woods, San Antonio, TX 78249-1450	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Photography and editing fee for the launch party
	(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 07/17/24	Payee name Tori Alberta Designs	
Amount (\$) 500	Payee address; City; State; Zip Code 5900 Balcones Dr, Austin, TX 78731	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Branding design for campaign swag, promotions, and advertising.
	<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 07/22/24	Payee name Tru Branding, LLC	
Amount (\$) 758.83	Payee address; City; State; Zip Code 1414 W Poplar St, San Antonio, TX 78207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Purchase of Loteria shirts to sell at the campaign launch 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

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.

1 Total pages Schedule F1: 5	2 FILER NAME Sayda V. Morales	3 Filer ID (Ethics Commission Filers)
---	--	--

4 Date 07/24/24	5 Payee name Tru Branding, LLC
----------------------------------	---

6 Amount (\$) 112.04	7 Payee address; 1414 W Poplar St,	City; San Antonio,	State; TX	Zip Code 78207
---------------------------------------	---	------------------------------	---------------------	--------------------------

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Campaign stickers to be given out as gifts to attendees of the campaign launch party
	(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 07/24/24	Payee name Tru Branding, LLC
-------------------------	--

Amount (\$) 150.42	Payee address; 1414 W Poplar St,	City; San Antonio,	State; TX	Zip Code 78207
------------------------------	--	------------------------------	---------------------	--------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Campaign pens to be given out as gifts to attendees of the campaign launch 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 7/27/24	Payee name 2M Smokehouse
------------------------	------------------------------------

Amount (\$) 605.98	Payee address; 2731 South WW White Road,	City; San Antonio,	State; TX	Zip Code 78222
------------------------------	--	------------------------------	---------------------	--------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description Food for the campaign launch 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
--	-------------------------------	---------------	-------------

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.

1 Total pages Schedule F1: 5	2 FILER NAME Sayda V. Morales	3 Filer ID (Ethics Commission Filers)
---	--	--

4 Date 08/05/24	5 Payee name Tru Branding, LLC
----------------------------------	---

6 Amount (\$) 385.37	7 Payee address; 1414 W Poplar St,	City; San Antonio,	State; TX	Zip Code 78207
---------------------------------------	---	------------------------------	---------------------	--------------------------

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gifts/Awards Expense	(b) Description Campaign shirts for volunteers to wear during block walking
	<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 08/06/24	Payee name Jackie Perez
-------------------------	-----------------------------------

Amount (\$) 1500	Payee address; 1624 Buena Vista St Ste 3,	City; San Antonio,	State; TX	Zip Code 78207
----------------------------	---	------------------------------	---------------------	--------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Half of the Campaign Manager stipend
	<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 08/11/24	Payee name Tru Branding, LLC
-------------------------	--

Amount (\$) 97.81	Payee address; 1414 W Poplar St,	City; San Antonio,	State; TX	Zip Code 78207
-----------------------------	--	------------------------------	---------------------	--------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards Expense	Description Car magnets as prizes and for sale to raise money for the campaign
	<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

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: 5	2 FILER NAME Sayda V. Morales	3 Filer ID (Ethics Commission Filers)
4 Date 08/12/24	5 Payee name Tru Branding, LLC	
6 Amount (\$) 302.02	7 Payee address; City; State; Zip Code 1414 W Poplar St, San Antonio, TX 78207	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Paper fans with the campaign logo given out to attendees of the campaign launch party
	(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 08/15/24	Payee name Tru Branding, LLC	
Amount (\$) 339.53	Payee address; City; State; Zip Code 1414 W Poplar St, San Antonio, TX 78207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign yard 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	Candidate / Officeholder name	Office sought Office held
Date 08/15/24	Payee name Tru Branding, LLC	
Amount (\$) 193.37	Payee address; City; State; Zip Code 1414 W Poplar St, San Antonio, TX 78207	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gifts/Awards Expense	Description Campaign embroidered hats to be sold to raise funds for the campaign and given as gifts to donors and 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

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: 5	2 FILER NAME Sayda V. Morales	3 Filer ID (Ethics Commission Filers)
---	--	--

4 Date 09/05/24	5 Payee name Tru Branding, LLC
----------------------------------	---

6 Amount (\$) 288.47	7 Payee address; 1414 W Poplar St,	City; San Antonio,	State; TX	Zip Code 78207
---------------------------------------	---	------------------------------	---------------------	--------------------------

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Double-sided campaign yard signs
	<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 09/13/24	Payee name Lustrous PR
-------------------------	----------------------------------

Amount (\$) 250	Payee address; 11103 West Ave, Suite 2101,	City; San Antonio,	State; TX	Zip Code 78213
---------------------------	--	------------------------------	---------------------	--------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Filmed and edited campaign videos to be uploaded to the campaign website
	<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