CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. 52 3 CANDIDATE / MS / MRS / MR OFFICE USE ONLY David **OFFICEHOLDER** NAME Date Received NICKNAME LAST SUFFIX Suarez 4 CANDIDATE / ADDRESS / PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **OFFICEHOLDER** MAILING **ADDRESS** Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** PHONE MS / MRS / MR 6 CAMPAIGN Johnny TREASURER Date Processed NAME SUFFIX NICKNAME LAST Date Imaged Bautista STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: STATE: ZIP CODE CITY: 7 CAMPAIGN TREASURER **ADDRESS** 2209 North Gate Circle Weslaco Texas 78599 (Residence or Business) AREA CODE PHONE NUMBER EXTENSION CAMPAIGN TREASURER PHONE 956) 463 - 7579 9 REPORT TYPE 30th day before election Runoff 15th day after campaign January 15 treasurer appointment (Officeholder Only) **Exceeded Modified** July 15 Final Report (Attach C/OH - FR) 8th day before election Reporting Limit 10 PERIOD Month Day Month Day Year COVERED 28 / 07 / 09 23 THROUGH 01 2023 ELECTION DATE **ELECTION TYPE** 11 ELECTION Runoff Primary Other Month Day Year Description General 11 / 07 / 2023 13 OFFICE SOUGHT (If known) OFFICE HELD (if any) 12 OFFICE Mayor City of Weslaco Mayor City of Weslaco 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. 14 NOTICE FROM POLITICAL COMMITTEE(S) COMMITTEE NAME COMMITTEE TYPE COMMITTEE ADDRESS GENERAL Additional Pages

GO TO PAGE 2

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

SPECIFIC

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	1	16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8800
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 5601.98
	4. TOTAL POLITICAL EXPENDITURES	\$ 60315.46
CONTRIBUTION BALANCE	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$ 35129.91
OUTSTANDING LOAN TOTALS	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$ 0
	vear, or affirm, under penalty of perjury, that the accompanying report is true unired to be reported by me under Title 15, Election Code. Signature of Can	and correct and includes all information When the correct and includes all information and correct and includes all information and informatio
Sworn to and subscribed 20 23, to certify w	which, witness my hand and seal of office. NACANNE (TONZALEZ	10th day of October. Notany
Signature of officer administer	ing oath Printed name of officer administering oath	Title of officer administering oath
(2) Unsworn Declaration	OR OR	
My name is	, and my date of birth is	
My address is		
CLEAR THE THE CHARLE SHAPE OF		ate) (zip code) (country)
Executed in	County, State of, on theday of(month)	, 20 (year)
	Signature of Candida	ate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	9 FILER NAME David Suarez 20 Filer ID (Ethics Com			nmission Filers)
21	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 8800
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 0
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0
4.	4. SCHEDULE E: LOANS			\$ 0
5.	5. SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 60315.46
6.	6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$ 8300
7.	7. SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$ 0
8.	8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$ 0
9.	9. SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS			\$ ₀
10.	10. SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH			\$ 0
11.	11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 0
12.	12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			\$ 0

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:
FILER NAME	David Suarez		3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor out-of-state PAC (ID#:) Randy & Alma Summers 7/7/2023 6 Contributor address; City; State; Zip Code Weslaco, Texas 78599		7 Amount of contribution (\$) 500.00	
Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	ctions)
Date Full name of contributor □ out-of-state PAC (ID#:			Amount of contribution (\$)
0/24/2020	Contributor address; City;	State; Zip Code	3300.00
Principal occur	Weslaco pation / Job title (See Instructions)	Texas Employer (See Instruc	etions)
Principal occup	validit 7 000 title (Dee mandations)		
Date	S2 Engineering PLLC	C (ID#:)	Amount of contribution (\$)
9/25/2023	Contributor address; City; Mission, Texas	State; Zip Code	5000.00
Principal occup	 pation / Job title (See Instructions)	Employer (See Instruc	tions)
Date		C (ID#:) State; Zip Code	Amount of contribution (\$)
Principal occuj	pation / Job title (See Instructions)	Employer (See Instruc	ctions)
	ATTACH ADDITIONAL COPIES	OF THIS SCHEDULE AS	NEEDED

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
Total pages Schedule F1: 48	2 FILER NAME David Suarez		3 Filer ID (Ethic	s Commission Filers)
7/03/23	5 Payee name Facebook			
Amount (\$)	7 Payee address;	City;	State;	Zip Code
710.57	Menlo Park, California 05571071			
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertisiment	Social Media	Advertisiment	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX. officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name	1,		
7/10/2023	Wix.com		*	
Amount (\$)	Payee address;	City;	State;	Zip Code
361.44 Californi		a, 33121632		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Fees	Digital Purcha	ise	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	O SECTION OF THE OWNER, OF THE OWNER,	Office held
Date	Payee name			
7/14/2023	Best Little Ware House			
Amount (\$)	Payee address;	City;	State;	Zip Code
405.00	Weslaco Texas			
	Category (See Categories listed at the top of this schedule)	Description	-	
PURPOSE OF EXPENDITURE	Fees	Storage		
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in. TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULEASNE	EDED	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel In District Contributions/Donations Made By Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out Of District Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 2 FILER NAME David Suarez 1 Total pages Schedule F1: 3 Filer ID (Ethics Commission Filers) 4 Date 5 Payee name upwork 7/18/23 Zip Code 6 Amount (\$) 7 Payee address; City; State; California, 893410 89.25 8 (a) Category (See Categories listed at the top of this schedule) (b) Description PURPOSE digital services OF Fees EXPENDITURE Check if travel outside of Texas. Complete Schedule T. (c) Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Veras King of Meats 7/21/23 Zip Code Amount (\$) City: State; Payee address; Weslaco Texas 427.21 Description Category (See Categories listed at the top of this schedule) **PURPOSE** OF EXPENDITURE Event expense Food Expense Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date Payee name 7/27/2024 upwork Zip Code Amount (\$) Payee address; City: State: California, 929356 29.99 Category (See Categories listed at the top of this schedule) Description PURPOSE OF digital services Fees EXPENDITURE Check if Austin, TX. officeholder living expense Check if travel outside of Texas. Complete Schedule T. Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Total pages Schedule F1: 48	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
^{Date} 7/31/23	5 Payee name upwork		
Amount (\$)	7 Payee address;	City;	State; Zip Code
790.45	California 050091		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	digital services	;
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n. TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
7/31/23	Walmart Super Center		
Amount (\$)	Payee address;	City:	State; Zip Code
609.84	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	The state of the s
PURPOSE OF EXPENDITURE	Food & Beverage Event	Event expens	se
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
7/31/23	upwork		
Amount (\$)	Payee address;	City;	State: Zip Code
107.95	California		
	Category (See Categories listed at the top of this schedule)	Description	and the second
PURPOSE OF EXPENDITURE	Fees	digital servi	ces
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	1. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries The Instruction Guide explains how to c	/ages/Contract Labor Other (enter a category not listed above) omplete this form.	
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers	
Date 7/14/23	5 Payee name Weslaco High School Athletic Dep	artment	
Amount (\$)	7 Payee address;	City; State; Zip Code	
540.00	Weslaco, Texas		
The second secon	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertisiment	sponsors	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
7/6/2024	Mario Cano		
Amount (\$)	Payee address;	City; State; Zip Code	
300.00	Mercedes, Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Consulting Expense	Digital Media Management	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
7/12/23	Ricardo Tamez		
Amount (\$)	Payee address;	City; State; Zip Code	
200.00		Weslaco, Texas	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description	
OF EXPENDITURE	Sponosrship	Sponsored event	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Credt/Card Payment

Event Expense Fees Food/Beverage Expense GifVAwards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Cities (select a selection and listed above)

Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME **David Suarez** 4 Date 7/18/23 5 Payee name Esteban Villareal Zip Code 6 Amount (\$) 7 Payee address; City; State: 380.00 Weslaco Texas (b) Description (a) Category (See Categories listed at the top of this schedule) 8 PURPOSE Advertisment Print Fees OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 7/14/23 Socorro Cortes State: Zip Code Amount (\$) Payee address; City: 350.00 Weslaco Texas Category (See Categories listed at the top of this schedule) Description PURPOSE Food & Beverage Expense OF Event expense EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Payee name Date Jaime Cervantes 724/23 Payee address; Zip Code Amount (\$) City; State; 200.00 Mercedes, Texas Description Category (See Categories listed at the top of this schedule) PURPOSE construction of signs OF contract labor EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

credit Card Payment	Committee Legal Services Salaries	/ages/Contract Labor Other (enter a category omplete this form.	not listed above)
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics C	Commission Filers)
Date 7/7/23	5 Payee name Jaga Technologies		
Amount (\$)	7 Payee address;	City; State;	Zip Code
910.00	McAllen, Texas		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Digital Purchase	Wireless Services Digital media	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought C	ffice held
Date	Payee name		
7/17/2023	Julio Marines		
Amount (\$)	Payee address;	City; State;	Zip Code
750.00	201 South Texas Blvd, Weslaco T	exas	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisiment	Advertisiment Expense	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought C	ffice held
Date	Payee name		
7/22/23	FLJ Productions		
Amount (\$)	Payee address;	City; State;	Zip Code
2500.00	Pharr, Texas		
AND THE PARTY OF T	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisiment Fees	Digital Media Production	P
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX. officeholder living e	xpense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
CAPCING TO TO THE TOTAL			

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries V The Instruction Guide explains how to describe the services and the services are services.	Vages/Contract Labor Other (enter a category not listed above) complete this form.		
1 Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)		
4 Date 7/07/23	5 Payee name Katelyn Villanueva	4		
6 Amount (\$)	7 Payee address;	City; State; Zip Code		
200.00	Alamo, Texa			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Video Production	Social Media Advertisiment		
	(c) Check if travel outside of Texas, Complete Schedule T.	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
08/01/2023	Facebook			
Amount (\$)	Payee address;	City; State; Zip Code		
235.10	Menlo Park, California			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertisment	Digital Purchase		
	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
08/01/2023	Upwork			
Amount (\$)	Payee address;	City; State; Zip Code		
176.20	California			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Fees	Digital Services		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED		

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Others content on the Property of the Pr

Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID (Ethlcs Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME David Suarez 48 5 Payee name 4 Date 08/04/23 Upwork Zip Code 6 Amount (\$) 7 Payee address; City; State: 107.95 California (b) Description (a) Category (See Categories listed at the top of this schedule) 8 **PURPOSE Digital Services** Fees OF **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense Office held Office sought Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Pavee name Date El Pastor Grill 08/07/2023 State; Zip Code City; Payee address; Amount (\$) McAllen 400.00 Category (See Categories listed at the top of this schedule) Description PURPOSE **Event Expense** Social Event OF EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Office sought Office held Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee name Date Support PD Filler 08/07/2023 State: Zip Code Amount (\$) Payee address; City: 194.85 MA Description Category (See Categories listed at the top of this schedule) PURPOSE **Digital Services** OF Fees EXPENDITURE Check if Austin, TX, officeholder living expense Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Office held Office sought Complete ONLY if direct expenditure to benefit C/OH

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	out of the state o
Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
Date 08/08/2023	5 Payee name Upwork		
Amount (\$)	7 Payee address;	City;	State; Zip Code
634.20	Bi, California		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Digtal Services	s
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/09/2023	Murphy		
Amount (\$)	Payee address;	City;	State; Zip Code
79.69	Weslaco, Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Expense	GOTV Progra	m
	Check if travel outside of Texas. Complete Schedule T.	Check if Ausli	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/10/2023	Murphy's		
Amount (\$)	Payee address;	City;	State; Zip Code
71.00	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Expense	GOTV Progra	nm
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Annual Control of the	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to d	complete this form.	
1 Total pages Schedule F1: 48	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
4 Date 08/11/23	5 Payee name Murphy	orania de la composición del composición de la composición de la composición de la composición del composición de la com	
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
86.14	Weslaco Texas		
В	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Tranpsoration Expense	GOTV Program	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/14//2023	Sunrise CAFE		
Amount (\$)	Payee address;	City;	State; Zip Code
255.06	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Event Expense	Meet and Gree	et
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/14/2023	Pizza Express		
Amount (\$)	Payee address;	City;	State; Zip Code
257.72	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food	Welaco East Football Team Event	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundralsing Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Class contents and properties of the Contents and Conten

Total pages Schedule F1: 2 FILER NAME David Suarez 48 Date 08/14/23 5 Payee name Upwork Amount (\$) 7 Payee address; 1079.99 (a) Category (See Categories listed at the top of this schedule) Fees (c) Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Payee name Upwork Amount (\$) Payee address; 654.69 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Purpose OF EXPENDITURE Category (See Categories listed at the top of this schedule) Fees Category (See Categories listed at the top of this schedule) Fees Category (See Categories listed at the top of this schedule) Fees Candidate / Officeholder name Candidate / Officeholder name Payee name Facebook Amount (\$) Payee name Facebook Amount (\$) Payee address; Menlo Park, California	City; California b) Description Digital Service Check if Austi Office sought	3 Filer ID (Ethics Commission Filers) State; Zip Code State; Zip Code Office held State; Zip Code
Amount (\$) 1079.99 The purpose of expenditure to benefit C/OH Purpose of expenditure to benefit C/OH The pu	California b) Description Digital Service Check if Austi Office sought	S n. TX, officeholder living expense Office held
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Fees (c) Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Candidate / Officeholder name Payee name Upwork Amount (\$) Payee address; Category (See Categories listed at the top of this schedule) Fees Category (See Categories listed at the top of this schedule) Fees Category (See Categories listed at the top of this schedule) Fees Category (See Categories listed at the top of this schedule) Fees Category (See Categories listed at the top of this schedule) Fees Category (See Categories listed at the top of this schedule) Fees Candidate / Officeholder name Candidate / Officeholder name Payee name Facebook Amount (\$) Payee address;	California b) Description Digital Service Check if Austi Office sought	S n. TX, officeholder living expense Office held
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PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Digital Service Check if Austi Office sought	n. TX, officeholder living expense Office held
Fees (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/15/2023 Upwork Amount (\$) Payee address; Category (See Categories listed at the top of this schedule) Fees Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Payee name 08/16/2023 Payee address; Payee name Payee name Payee name Facebook Amount (\$) Payee address;	Check if Austi	n. TX, officeholder living expense Office held
Complete ONLY if direct expenditure to benefit C/OH Date Payee name Upwork Amount (\$) Payee address; Category (See Categories listed at the top of this schedule) Pees Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Category (See Categories listed at the top of this schedule) Fees Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/16/2023 Payee address; Amount (\$) Payee address;	Office sought	Office held
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/15/2023 Upwork Amount (\$) Payee address; 654.69 Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Candidate / Officeholder name Payee name Payee name Payee name Facebook Amount (\$) Payee address;	Office sought	Office held
Date 08/15/2023 Payee name Upwork Amount (\$) Payee address; Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Check If travel outside of Texas. Complete Schedule T. Candidate / Officeholder name Date 08/16/2023 Payee address; Payee name Facebook Payee address;		
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Amount (\$) Payee address; 654.69 Category (See Categories listed at the top of this schedule) Fees Check If travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Payee name 08/16/2023 Payee address;	City;	State; Zip Code
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Payee name Payee address; Category (See Categories listed at the top of this schedule) Fees Check If travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	City;	State; Zip Code
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Payee name 08/16/2023 Payee address; Category (See Categories listed at the top of this schedule) Fees Check If travel outside of Texas. Complete Schedule T. Candidate / Officeholder name		
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Candidate / Officeholder name Payee name 08/16/2023 Payee address;	California, 33121632	
Fees Check If travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Payee name 08/16/2023 Facebook Amount (\$) Payee address;	Description	
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 08/16/2023 Facebook Amount (\$) Payee address;	Digital Purcha	se
Date Payee name 08/16/2023 Facebook Amount (\$) Payee address;	Check if Austin, TX, officeholder living expense	
08/16/2023 Facebook Amount (\$) Payee address;	Office sought	Office held
Amount (\$) Payee address;		
20 x 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
46.94 Menlo Park, California	City;	State; Zip Code
Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF Advertisment EXPENDITURE	Digital Serv	ices
Check if travel outside of Texas. Complete Schedule T.	Digital Serv	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH		
ATTACH ADDITIONAL COPIES OF THIS S		Office held

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
CreditCard Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 48	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
4 Date 08/17/2023	5 Payee name upwork		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
525.00	California		
В	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	fees	Digital Service	98
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	lin. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
08/18/2023	Wix.com		
Amount (\$)	Payee address;	City;	State; Zip Code
77.94	California, 33121632		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Fees	Digital Purcha	ase
	Check if travel outside of Texas. Complete Schedule T.	Check if Aus	tin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/18/2023	facebook		
Amount (\$)	Payee address;	City;	State; Zip Code
75.00	California		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisment	Social	Media Boosting
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	tin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NE	EDED
			NO. 2007 (1970)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

1 Total pages Schedule F1: 48 4 Date 48 5 Payee name HEB 6 Amount (\$) 7 Payee address; City; State; Zip Code 20.68 Weslaco, Texas (a) Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE (c) Check if revel outside of Texas. Complete Schedule Taylor California, 33121632 Payee address; City; State; Zip Code Office held Office held Payee name Facebook Amount (\$) Payee address; City; State; Zip Code Office held Category (See Categories listed at the top of this schedule) Date O8/21/2023 Facebook Amount (\$) Payee address; City; State; Zip Code Category (See Categories listed at the top of this schedule) Office sought Category (See Categories listed at the top of this schedule) Digital Purchase Complete ONLY if direct categories listed at the top of this schedule) Digital Purchase Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense Complete ONLY if direct categories listed at the top of this schedule T. Check if Austin, TX, officeholder inving expense	Credit Card Payment	The Instruction Guide explains how to	complete this form.		
### Amount (\$)		2 FILER NAME David Suarez		3 Filer ID (Ethic	s Commission Filers)
20.68 Weslaco, Texas (a) Category (See Categories listed at the top of this schedule) (b) Description GOTV Program Fransportation Expense (c) Check if tweel outside of Texas. Complete Schedule T. Check if Austin. TX. officeholder living expense Oscomplete ONLY if direct expenditure to benefit C/OH Date 08/21/2023 Payee name Facebook Amount (\$) Payee address; Category (See Categories listed at the top of this schedule) Advertisment Candidate / Officeholder name Digital Purchase Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Digital Purchase Camplete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office sought Office held	8/21/23				
Category (See Categories listed at the top of this schedule) Candidate / Office held	Amount (\$)	7 Payee address;	City;	State;	Zip Code
PURPOSE OF EXPENDITURE (e) Check if travel outside of Texas. Complete Schedule T. Check if Auslin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office sought Office held Payee name Facebook Amount (\$) Payee address; City: State: Zip Code 59.79 Menolo Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office sought Office held Oescription Digital Purchase Candidate / Officeholder name Office sought Office sought Office held Office held Office held Oescription Digital Purchase Candidate / Officeholder name Office sought Office sought Office held	20.68	Weslaco, Texas			
Transportation Expense Complete ONLY if direct expenditure to benefit C/OH	3	(a) Category (See Categories listed at the top of this schedule)	(b) Description	han	
Complete QNLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held	OF	Transportation Expense	GOTV Program	m	
Date Payee name 08/21/2023 Facebook Amount (\$) Payee address; City: State: Zip Code 59.79 Menolo California, 33121632 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name 08/21/2023 HEB		(c) Check if travel outside of Texas. Complete Schedule T.	Check if Auslin	n, TX, officeholder livin	g expense
Amount (\$) Payee address; City; State; Zip Code 59.79 Menolo California, 33121632 Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name O8/21/2023 Payee name HEB			Office sought		Office held
Amount (\$) Payee address; City; State; Zip Code 59.79 Menolo California, 33121632 Category (See Categories listed at the top of this schedule) Description PURPOSE OF EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Irving expense Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Payee name HEB	Date	Payee name	***************************************		
Menolo California, 33121632 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Advertisment Digital Purchase Check if travel outside of Texas. Complete Schedulo T. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Payee name HEB	08/21/2023	Facebook			
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Advertisment Digital Purchase Check if ravel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Payee name HEB	Amount (\$)	Payee address;	City;	State;	Zip Code
PURPOSE OF EXPENDITURE Advertisment Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Payee name HEB	59.79	Menolo	California, 33121632		
Advertisment Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Digital Purchase Check if Austin, TX, officeholder living expense Office sought Office held Payee name HEB		Category (See Categories listed at the top of this schedule)	Description		
Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Office held Date Payee name HEB	OF	Advertisment	Digital Purcha	se	
Date Payee name 08/21/2023 HEB		Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder livin	g expense
08/21/2023 HEB			Office sought		Office held
	Date	Payee name			
Amount (\$) Poyos address: City: State: 7in Code	08/21/2023	HEB			
Arribulit (4) Payee address, City, State, Zip Code	Amount (\$)	Payee address;	City;	State;	Zip Code
6.50 Weslaco Texas	6.50	Weslaco Texas			
Category (See Categories listed at the top of this schedule) Description		Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE Tranpsoration Expense GOTV	OF	Tranpsoration Expense	GOTV		
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		Check if travel outside of Texas. Complete Schedule T.	Check if Austli	n, TX, officeholder livin	g expense
Complete ONLY if direct			Office sought		Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment		Wages/Contract Labor Other (enter a category n	ot listed above)
Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Co	ommission Filers)
08/21/23	5 Payee name Upwork		
Amount (\$)	7 Payee address;	City; State;	Zip Code
1837.50	California		
3	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Digital Services	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Of	fice held
Date	Payee name		
08/21/2023	SAMS Club		
Amount (\$)	Payee address;	City; State;	Zip Code
97.50	Harlingen, Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food & Beverage Event	community event	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Of	fice held
Date	Payee name		
08/22/2023	Facebook		
Amount (\$)	Payee address;	City; State;	Zip Code
75.00	Menlo Park, California		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisment	Social Media Advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living ex	pense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought O	ffice held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salanes/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (cale of page 2015) and the page 2015.

Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Vages/Contract Labor C	ravel Out Of District Other (enter a category not listed above)
Total pages Schedule F1:	2 FILER NAME David Suarez	3	Filer ID (Ethics Commission Filers)
Date 08/22/2023	5 Payee name HEB		ng di kacaminan di Saminang na dawa (dan dahi ba Saki) Sampinsa Sa sakino
Amount (\$)	7 Payee address;	City;	State; Zip Code
23.99	Weslaco, Texas		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Event expense	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, T	X. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		a publicare a supra con supra de maria de maria de maria de maria de la composición de la composición de la co
08/22/2023	Reynas BBQ		
Amount (\$)	Payee address;	City;	State; Zip Code
779.51	Weslaco, Texas		
<u></u>	Category (See Calegories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Event Expense	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
08/22/23	upwork		
Amount (\$)	Payee address;	City;	State; Zip Code
694.75	California		
	Category (See Categories listed at the top of this schedule)	Description	***************************************
PURPOSE OF EXPENDITURE	Fees	Digital Services	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, T	X, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED	ED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Pollning Expense Printing Expense Salaries/Wages/Contract Labor

Total pages Schodula E1.	2 FILED NAME		3 Filer ID (Ethics	Commission Filers
Total pages Schedule F1: 48	David Suarez		3 Filer ID (Ettilos	Commission Fliers)
Date 08/23/23	5 Payee name			
	Facebook			
Amount (\$)	7 Payee address;	City;	State;	Zip Code
104.60	Menlo Park, California 05571071			
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertisiment	Social Media A	Advertisiment	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, 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			
08/25/2023	Facebook			
Amount (\$)	Payee address;	City;	State;	Zip Code
125.00	Menlo Park, California			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertisment	Digital Purchas	se	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
08/25/2023	Walmart Super Center			
Amount (\$)	Payee address;	City;	State;	Zip Code
185.76	Weslaco Texas			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food & Beverage	Event Expens	е	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	expense
Complete ONLY if direct	Candidate / Officeholder name	Office sought		Office held

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 Accounting/Banking Consulting Expense Candidate/Officeholder/Political Committee Credit Card Payment

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

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Contributions/Donations Made By Legal Services Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Suarez 48 4 Date 5 Payee name Sams Club 08/25/2023 6 Amount (\$) 7 Payee address; City; State; Zip Code 169.79 McAllen, Texas (a) Category (See Categories listed at the top of this schedule) (b) Description 8 PURPOSE **Event Expense** Food & Beverage OF EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. afficeholder living expense 9 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date Facebook 08/28/2023 Amount (\$) State: Zip Code Payee address; City: 126.47 Menlo Park, California Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertisment OF Digital Purchase EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 08/28/2023 Facebook Amount (\$) Payee address; City: State: Zip Code 175.00 Menlo Park, California Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertisment Social Media Advertising **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX. officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Event Expense Fees Food/Beverage Expense GifVAwards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/	Wages/Contract Labor Other (enter a category not listed above)
	The Instruction Guide explains how to	complete this form.
Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
Date	5 Payee name	
08/28/2023	Nanas Taqueria	
Amount (\$)	7 Payee address;	City; State; Zip Code
490.83	Weslaco Texas	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Food & Beverage	Event Expense
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
08/28/2023	HEB	
Amount (\$)	Payee address;	City; State; Zip Code
155.16	Weslaco, Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Food & Beverage	Event Expense
	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
08/29/2023	Upwork	
Amount (\$)	Payee address;	City; State; Zip Code
439.95	California	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Fees	Digital Services
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to a	Other (enter a category not listed above) complete this form.
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
Date 08/31/23	5 Payee name Facebook	
Amount (\$)	7 Payee address;	City; State; Zip Code
250.00	Menlo Park, California 05571071	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertisiment	Social Media Advertisiment
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
08/31/2023	Upwork	
Amount (\$)	Payee address;	City: State; Zip Code
210.00	California	California, 33121632
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Fees	Digital Purchase
	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
08/01/2023	Weslaco High School	
Amount (\$)	Payee address;	City: State; Zip Code
500.00	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE		Sponorship
OF	Advertisment	Sponorship
OF	Advertisment Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

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 Accounting/Banking Consulting Expense

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District

Contributions/Donations Made B Candidate/Officeholder/Politica Credit Card Payment	y Gift/Awards/Memorials Expense Prin	thing Expense aries/Wages/Contract Labor Other (enter a category not listed above) w to complete this form.
1 Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
4 Date 08/02/2023	5 Payee name Jose Burgos	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
370.00	Weslaco Texas	
В	(a) Category (See Categories listed at the top of this sched	ule) (b) Description
PURPOSE OF EXPENDITURE	Sponorship	Event Sponsor
	(c) Check if travel outside of Texas. Complete Schedul	leT. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
08/28/2023	David Xavier Suarez	
Amount (\$)	Payee address;	City; State; Zip Code
361.44	Weslaco Texas	
	Category (See Calegories listed at the top of this schedu	ule) Description
PURPOSE OF EXPENDITURE	Fees	Digital Purchase
	Check if travel outside of Texas. Complete Schedu	le T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
10/10/2023	Knights of Columbus	
Amount (\$)	Payee address;	City; State; Zip Code
100.00	Weslaco Texas	
	Category (See Categories listed at the top of this schedu	ule) Description
PURPOSE OF EXPENDITURE	Event Expense	Sponosrship
	Check if travel outside of Texas. Complete Schedu	leT. Check if Austln, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF	THIS SCHEDULE AS NEEDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/V The Instruction Guide explains how to a	Vages/Contract Labor Other (enter a category not listed above) complete this form.
Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
8/15/2023	5 Payee name Weslaco Athletic Booster Cli	ub
Amount (\$)	7 Payee address;	City; State; Zip Code
500.00	Weslaco Texas	
3	(a) Category (See Categories listed at the top of this schedule) (b) Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Fundraising Event
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
8/15/2023	Weslaco Athletic Booster Club	
Amount (\$)	Payee address;	City; State; Zip Code
700.00	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Advertisment	Program Advertisment
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	Maria Cara Cara Cara Cara Cara Cara Cara
08/22/2023	Weslaco East Athletic Booster Club	
Amount (\$)	Payee address;	City; State; Zip Code
640.00	Weslaco, Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Advertisment	Advertisment
	Check if travel outside of Texas. Complete Schedulo T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

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 Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

contributions/Donations Made By Candidate/Officeholder/Political redit Card Payment	Gift/Awards/Memorials Expense Printi	g Expense Travel In District ng Expense Travel Out Of District ies/Wagos/Contract Labor Other (enter a category not listed above)
TOTAL COLOT AND THE STATE OF TH	The Instruction Guide explains how	to complete this form.
Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers
Date 08/29/2023	5 Payee name Illeana Rivera	
Amount (\$)	7 Payee address;	City; State; Zip Code
351.00	Weslaco Texas	
	(a) Category (See Categories listed at the top of this schedul	(b) Description
PURPOSE OF		Golf Team Advertisment
EXPENDITURE	Sponorship	Goir realit Advertisition
	(c) Check if travel outside of Texas. Complete Schedule	T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
8/12/2023	Issac Anciso	
Amount (\$)	Payee address;	City; State; Zip Code
250.00	Weslaco Texas	
· · · · · · · · · · · · · · · · · · ·	Category (See Categories listed at the top of this schedule) Description
PURPOSE OF EXPENDITURE	Contract Labor	advertisment sign construction
	Check if travel outside of Texas. Complete Schedule	T. Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
8/29/2023	Juan Carlos Cardenas	
Amount (\$)	Payee address;	City; State; Zip Code
335.00	Weslaco Texas	
	Category (See Categories listed at the top of this schedule	Description
PURPOSE OF EXPENDITURE	Event Sponsor	Fundraising Event
	Check if travel outside of Texas. Complete Schedule	T. Check if Austin, TX, officeholder living expense
The second secon		Office sought Office held

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
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
Cmdil Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printling Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to o	complete this form.	
Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers
Date 8/16/23	5 Payee name Janies Restaurant		
Amount (\$)	7 Payee address;	City;	State; Zip Code
234.00	Weslaco Texas		
3	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Event Exper	nse
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	in. TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name H	Office sought	Office held
Date	Payee name		
8/14/23	Kights of Columbus		
Amount (\$)	Payee address;	City;	State; Zip Code
150.00	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF	Sponorship	Fuert Changer	
EXPENDITURE	Эропогатір	Event Sponsor	
	Check if travel outside of Texas. Complete Schedule T.		n, 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		
8/28/23	Jonathon Suarez		
Amount (\$)	Payee address;	Clty;	State; Zip Code
250.00	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	Sign placement	t and construction
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
		Office sought	Office held

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursernent Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Contributions/Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y Gift/Awards/Memorials Expense Printing	g Expense Travel Out Of District ps:Wages/Contract Labor Other (enter a category not listed above) to complete this form.		
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)		
B/28/23	5 Payee name TMPA			
Amount (\$)	7 Payee address;	City; State; Zip Code		
500.00	Weslaco Texas			
	(a) Category (See Calegories listed at the top of this schedule) (b) Description		
PURPOSE OF EXPENDITURE	Sponosrship	Event Sponsor		
	(c) Check if travel outside of Texas. Complete Schedule 1	. Check if Austin. TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
8/22/23	Issac Anciso			
Amount (\$)	Payee address;	City; State; Zip Code		
525.00	Weslaco Texas			
	Category (See Categories listed at the top of this schedule	Description		
PURPOSE OF EXPENDITURE	Contract Labor	costruction signs		
	Check if travel outside of Texas. Complete Schedule 1	Check If Auslin, TX, officeholder living expense		
Complete <u>QNLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		
Date	Payee name			
8/22/23	Memo Mendiola The Eatery	· ·		
Amount (\$)	Payee address;	City; State; Zip Code		
195.00	Weslaco Texas			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertisment	Digital Services		
	Check if travel outside of Texas. Complete Schedule 1	1		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held		
	ATTACH ADDITIONAL COPIES OF TI	HIS SCHEDULE AS NEEDED		

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

Event Expense Fees Food/Beverage Expense Gilf/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (eriter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)	
4 Date 8/31/2023	5 Payee name Diana Casares			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
500.00	Weslaco Texas			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Contract Labor	GOTV Program	m	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
8/31/2023	Esteban Villareal			
Amount (\$)	Payee address;	City;	State; Zip Code	
190.00	Weslaco Texas			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Sponsorship	Event Sponso	r	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
8/31/23	Ruby Red Solutions			
Amount (\$)	Payee address;	City:	State; Zip Code	
2000.00	Weslaco, Texas			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Media Advertisment	Digital Serv	ices	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held	
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEE	EDED	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	complete this form.	
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filer	
Date 8/30/23	5 Payee name Eloisa Pena		
Amount (\$)	7 Payee address;	City; State; Zip Code	
500.00	Elsa, Texas		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE		Event Spensor	
OF EXPENDITURE	Sponsorship	Event Sponsor	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
8/30/2023	Efrain Martinez		
Amount (\$)	Payee address;	City: State; Zip Code	
3000.00	Edinburg, Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	consulting	GOTV Program	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
8/15/2023	FLJ Productions		
Amount (\$)	Payee address;	City; State; Zip Code	
2500	Pharr, Texas		
STATE OF STREET	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Media Productions	Productions	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct	Candidate / Officeholder name	Office sought Office held	

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

Event Expense Fees Food/Beverage Expense Glft/Awards/Memorials Expense Logal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

redit Card Payment	The Instruction Guide explains how to o	complete this form.	4/2
Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
Date 8/8/23	5 Payee name Daniel Castaneda		
Amount (\$)	7 Payee address;	City;	State; Zip Code
1000.00	Weslaco Texas		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertisment	Advertis	sment
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n. TX. officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
8/14/2023	Murphy's		
Amount (\$)	Payee address;	City;	State; Zip Code
31.94	Weslaco Texas		
MANA	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Transportation Expense	GOTV Pro	ogram
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/01/23	Facebook		
Amount (\$)	Payee address;	City;	State; Zip Code
129.93	Menlo Park, California		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisment	Social Media	a Advertising
		Check if Austi	n, TX, officeholder living expense
	Check if travel outside of Texas. Complete Schedule T.		

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
Date 09/01/2023	5 Payee name Facebook		
Amount (\$)	7 Payee address;	City;	State; Zip Code
129.93	Menlo Park, California		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertisment	Social Media Ad	dvertising
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX. officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/05/23	Don Pedro Mexican Rest		
Amount (\$)	Payee address;	City;	State; Zip Code
850.00	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Event Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/05/2023	HEB		
Amount (\$)	Payee address;	City;	State; Zip Code
15.05	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Event Exper	nse
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense
	Candidate / Officeholder name	Office sought	Office held

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers
9/05/2023	5 Payee name Upwork	
Amount (\$)	7 Payee address;	City; State; Zip Code
675.50	California	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Fees	Digital Services
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/05/2023	Walmart Super Center	
Amount (\$)	Payee address;	City; State; Zip Code
51.81	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Food & Beverage	Event Expense
	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/05/2023	Murphy's	
Amount (\$)	Payee address;	City; State; Zip Code
69.83	Weslaco Texas	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Tranpsoration Expense	GOTV Program
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
1 Total pages Schedule F1: 48	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
4 Date 9/08/2023	5 Payee name Facebook		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
475.00	Menlo Park, California		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertisment	Digital Ser	vices
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX. officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/06/2023	The Home Depot		
Amount (\$)	Payee address;	City;	State; Zip Code
61.66	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	expense	construction m	aterial
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/11/2023	Upwork		
Amount (\$)	Payee address;	City;	State; Zip Code
262.50	California		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	fees	Digital Servi	ces
	Check if travel outside of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL CODIES OF THIS	SCHEDULE AS NE	EDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out Of District
Others (selected expense)

Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commiss	ion Filers)
Date 9/08/2023	5 Payee name Wix	***************************************	
Amount (\$)	7 Payee address;	City; State; Zip C	ode
77.94	California		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Fees	Digital Services	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office he	ld
Date	Payee name		
9/8/2023	Walmart Super Center		
Amount (\$)	Payee address;	City; State; Zip C	ode
22.61	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	expense	office supplies	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office he	ld
Date	Payee name		
9/11/2023	Walmart Super Center		
Amount (\$)	Payee address;	City; State; Zip C	ode
58.46	Weslaco Texas		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description	
OF EXPENDITURE	expense	office supplies	
	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office h	eld

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 Accounting/Banking Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Fees 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 Salaries/Wages/Contract Labor Legal Services Other (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) David Suarez 48 4 Date 5 Payee name Walmart Super Center 9/11/2023 Zip Code 6 Amount (\$) 7 Payee address; City: State; Weslaco Texas 19.48 (b) Description 8 (a) Category (See Categories listed at the top of this schedule) **PURPOSE** expense Food & Beverage EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office sought Office held Candidate / Officeholder name 9 Complete ONLY if direct expenditure to benefit C/OH Payee name Date 9/12/2023 Upwork Amount (\$) Payee address: City; State: Zip Code 741.65 California Category (See Categories listed at the top of this schedule) Description PURPOSE Digital Services OF Fees EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Payee name Date 9/12/2023 Facebook Amount (\$) Payee address; Zip Code City: State: Menlo Park, California 446.02 Description Category (See Categories listed at the top of this schedule) PURPOSE OF Digital Services Advertisment EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held

Complete ONLY if direct expenditure to benefit C/OH

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

Event Expense Fees Food/Beverage Expense Gif/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries A The Instruction Guide explains how to	Complete this form. Other (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
4 Date 9/14/2023	5 Payee name The Home Depot	
6 Amount (\$)	7 Payee address;	City; State; Zip Code
11.88	Weslaco Texas	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	expense	construction material
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/15/23	Walmart Super Center	
Amount (\$)	Payee address;	City; State; Zip Code
59.26	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	office supplies	office supplies
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/15/2023	HEB	
Amount (\$)	Payee address;	City; State; Zip Code
9.60	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	office supplies	suppplies
	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Ol-	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	S SCHEDULE AS NEEDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wares/Contract Labor

T	0 20 20 11112		Files ID (Ethies Commission Filese)
Total pages Schedule F1: 48	David Suarez		3 Filer ID (Ethics Commission Filers)
9/18/2023	5 Payee name Walmart Super Center		
Amount (\$)	7 Payee address;	City;	State; Zip Code
184.07	Weslaco Texas		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Event Expens	е
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin.	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/18/23	Sunrise CAFE		
Amount (\$)	Payee address;	City;	State; Zip Code
562.60	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	AND THE RESIDENCE OF THE PROPERTY OF THE PROPE
PURPOSE OF EXPENDITURE	Food & Beverage	Event Expense	
	Check if travel outside of Toxas. Complete Schedule T.	Check if Austin,	TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/18/2023	Murphy's		
Amount (\$)	Payee address;	City;	State; Zip Code
39.11	Weslaco Texas		
1		T 5	
BURDOST	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Tranpsoration Expense	GOTV Program	1
OF		GOTV Program	TX, officeholder fiving expense

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Relimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Manes/Contract Labor

Total pages Schedule F1:	2 FILER NAME - 110	3 Filer ID (Ethics Commission Filers)
48	David Suarez	
Date	5 Payee name	
9/19/23	Upwork	
Amount (\$)	7 Payee address;	City; State; Zip Code
593.25	California	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE		
OF EXPENDITURE	Fees	Digital Services
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
9/20/2023	Walmart Super Center	
Amount (\$)	Payee address;	City; State; Zip Code
6.86	Weslaco Texas	
alara a restriction de la little de la company	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF	l l	00TV/ B
EXPENDITURE	suppplies	GOTV Program
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OI	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/21/23	Veras King of Meats	
Amount (\$)	Payee address;	City; State; Zip Code
49.82	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Food & Beverage	Event expense
		Check if Austin, TX, officeholder living expense
	Check if travel outside of Texas. Complete Schedule T.	Check it Additit, 174, diffeetidade fiving dispersal

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

Event Expense Fees Food/Beverage Expense GifVAwards/Memorials Expense Legal Services

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/ The Instruction Guide explains how to	Wages/Contract Labor Other (enter a category not listed above) complete this form.
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
Date 9/21/2023	5 Payee name HEB	
Amount (\$)	7 Payee address;	City; State; Zip Code
72.63	Weslaco Texas	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Food & Beverage Event	Event Sponsor
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin. TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought Office held
Date	Payee name	
9/22/2023	HEB	
Amount (\$)	Payee address;	City; State; Zip Code
77.96	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Food & Beverage	Event expense
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/25/2023	Facebook	
Amount (\$)	Payee address;	City; State; Zip Code
75.00	Menlo Park, California	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Advertisment	Social Media Advertising
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Exponse Polling Expense Printing Expense Salarios/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
9/25/2023	5 Payee name Cafe El Jardin		
Amount (\$)	7 Payee address;	City;	State; Zip Code
493.12	Weslaco Texas		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Food & Beverage	Event expens	e
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/25/2023	Facebook		
Amount (\$)	Payee address;	City;	State; Zip Code
75.00	Menlo Park, California		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisment	Social Media Advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/25/2023	Walmart Super Center		
Amount (\$)	Payee address;	City;	State; Zip Code
40.56	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Tranpsoration Expense	GOTV Progra	am
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Mernorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (epicars expenses and listed above)

credit Card Payment	The Instruction Guide explains how to	complete this form.
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
Date 9/26/2023	5 Payee name Facebook	
Amount (\$)	7 Payee address;	City; State; Zip Code
75.00	Menlo Park, California	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertisment	Social Media Advertising
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/26/2023	Murphy's	
Amount (\$)	Payee address;	City; State; Zip Code
68.04	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Tranpsoration Expense	GOTV Program
	Check if travel outside of Texas. Complete Schedule T.	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	
9/26/2023	Upwork	
Amount (\$)	Payee address;	City; State; Zip Code
572.25	California	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Fees	Digital Services
EXI ENDITORE		
LAI ENDITORE	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

	2 FILER NAME David Suprez		3 Filer ID (Ethic	s Commission Filers)
48	David State2		O THE TO (EINE	
9/28/2023	5 Payee name BSN Sports			
Amount (\$)	7 Payee address;	City;	State;	Zip Code
399.44	Farmers Branc, Texas			
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertisment	advertisment	propoganda	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aust	lin. TX. officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought		Office held
Date	Payee name			
9/28/23	Facebook			
Amount (\$)	Payee address;	City;	State;	Zip Code
600.00	Menlo Park, California			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertisment	Social Medi	a Advertising	
	Check if travel outside of Texas. Complete Schedule T.	Check if Ausi	in, TX, officeholder living	g expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought		Office held
Date	Payee name			
9/29/23	Veras King of Meats			
	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	City;	State;	Zip Code
9/29/23	Veras King of Meats	City;	State;	Zip Code
9/29/23 Amount (\$) 122.83	Veras King of Meats Payee address;	City; Description	State;	Zip Code
9/29/23 Amount (\$)	Veras King of Meats Payee address: Weslaco Texas	·		Zip Code
9/29/23 Amount (\$) 122.83 PURPOSE OF	Veras King of Meats Payee address; Weslaco Texas Category (See Categories listed at the top of this schedule)	Description Event expens		

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to d	complete this form.		
Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics	Commission Filers)
Date 9/29/2023	5 Payee name HEB			
Amount (\$)	7 Payee address;	City;	State;	Zip Code
117.30	Weslaco Texas			
	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Food & Beverage Event	Event exper	nse	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n. TX. officeholder living	expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name	AND THE PARTY OF T		
9/29/2023	HEB			
Amount (\$)	Payee address;	City;	State;	Zip Code
31.74	Weslaco Texas			
A STATE OF THE STA	Category (See Categories listed at the top of this schedule)	Description	PARES - STATE OF STAT	
PURPOSE OF EXPENDITURE	Tranpsortation Expense	GOTV Prog	ram	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
9/25/2023	Tierra Santa			
Amount (\$)	Payee address;	City;	State;	Zip Code
100.00	Weslaco Texas			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Food & Beverage	Event expens	se	
		Chack if Austi	in, TX, officeholder living	expense
	Check if travel outside of Texas. Complete Schedule T.	L Check ii Adsii		Series Material Control

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

Event Expense Fees Food/Beverage Expense GifVAwards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

		complete this form.
Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
Date 9/18/2023	5 Payee name Maria A Mendez	
Amount (\$)	7 Payee address;	City; State; Zip Code
200.00	Edinburg, Texas	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertisment	GOTV Program
	(c) Check if travel outside of Texas. Complete Schedulo T.	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9-1-2023	Su Casa Adult Day Care	
Amount (\$)	Payee address;	City; State; Zip Code
100.00	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Event expense	Sponorship
	Check if travel outside of Texas. Complete Schedule T.	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	
9/05/2023	Guadalupe Rivera	
Amount (\$)	Payee address;	City; State; Zip Code
1000.00	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Advertisment	GOTV Program
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

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

Event Expense Fees Food/Boverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wades/Contract Labor

Candidate/Officeholder/Politica credit Card Payment	al Committee Legal Services Salaries/ The Instruction Guide explains how to a	Wages/Confract Labor Other (enter a category not listed above) complete this form.
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
Date 9/2/2023	5 Payee name Issac Anciso	
Amount (\$)	7 Payee address;	City; State; Zip Code
250.00	Weslaco Texas	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertisment	construction material
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/O	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/2/2023	Xavier Suarez	
Amount (\$)	Payee address;	City; State; Zip Code
250.00	Weslaco Texas	
	Category (See Calegories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Contract Labor	GOTV Program
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/2/2023	Jonathon Suarez	
Amount (\$)	Payee address;	City; State; Zip Code
250.00	Weslaco Texas	
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE		advertisment sign construction
	Advertisment	advertisment sign construction
OF	Advertisment Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (expense of listed above)

Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 3 Filer ID (Ethics Commission Filers) 1 Total pages Schedule F1: 2 FILER NAME David Suarez 4 Date 5 Payee name 09/6/2023 Issac Anciso 7 Payee address; 6 Amount (\$) City; Zip Code State: Weslaco Texas 250.00 (a) Category (See Categories listed at the top of this schedule) (b) Description 8 **PURPOSE** Advertisment advertisment sign construction EXPENDITURE (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name 9/07/2023 Pete Garcica Amount (\$) Payee address; City; State: Zip Code 640.00 Weslaco Texas Category (See Categories listed at the top of this schedule) Description PURPOSE advertisment OF T-shirts EXPENDITURE propoganda Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH Date Payee name 9/13/2023 Letticia Lorenzo Amount (\$) Payee address; City: Zip Code State: Weslaco Texas 783.50 Category (See Categories listed at the top of this schedule) Description PURPOSE OF Event expense Food & Beverage **EXPENDITURE** Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office held Candidate / Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)

Credit Card Payment	The Instruction Guide explains how to	complete this form.	
Total pages Schedule F1:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)
Date 9/11/2023	5 Payee name Juanita Augilera		
Amount (\$)	7 Payee address;	City;	State; Zip Code
1000.000	Weslaco Texas		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Contract Labor	Tranpsortation	Expense
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9-9-2023	Issac Anciso		
Amount (\$)	Payee address;	City;	State; Zip Code
275.00	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisment	advertisment s	ign construction
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
9/11/2023	Xavier Suarez		
Amount (\$)	Payee address;	City;	State: Zip Code
500.00	Weslaco Texas		
	Category (See Categories listed at the lop of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	GOTV Prog	gram
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (expenses the expense)

Credit Card Payment	The Instruction Guide explains how to a	Other (enter a category not listed above)
Total pages Schedule F1:	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)
9/11/2023	5 Payee name Jonathon Suarez	
Amount (\$)	7 Payee address;	City; State; Zip Code
500.00	Weslaco Texas	
	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE		
OF EXPENDITURE	Event expense	Food & Beverage
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/19/2023	Katelyn Villanueva	
Amount (\$)	Payee address;	City; State; Zip Code
200.00	Alamo, Texas	
	Category (See Calegories listed at the top of this schedule)	Description
PURPOSE	w w 100 10	
OF EXPENDITURE	Advertisment	Digital Services
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
9/19/2023	Issac Anciso	
Amount (\$)	Payee address;	City; State; Zip Code
250.00	Weslaco Texas	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description
OF EXPENDITURE	Advertisment	advertisment sign construction
BERNEL STONE OF THE RESERVE OF BERNEL STONE	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED

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

Event Expense Fees Food/Beverage Expense GifVAwards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries A The Instruction Guide explains how to	Wages/Contract Labor Other (enter a category not listed above) complete this form.	
1 Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)	
9/19/2023	5 Payee name Jonathon Suarez		
6 Amount (\$)	7 Payee address;	City; State; Zip Code	
250.00	Weslaco Texas		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE			
OF EXPENDITURE	Advertisment	advertisment sign construction	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
9/16/2023	Xavier Suarez		
Amount (\$)	Payee address;	City; State; Zip Code	
250.00	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisment	advertisment sign construction	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
9/22/2023	Thelma Anciso		
Amount (\$)	Payee address;	City; State; Zip Code	
200.00	Weslaco Texas		
10.77 (10.00)	Category (See Calegories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	GOTV Program	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEEDED	

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Roimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Total pages Schedule F1: 48	2 FILER NAME David Suarez	3 Filer ID (Ethics Commission Filers)	
9/22/2023	5 Payee name Ruby Red Solutions		
Amount (\$)	7 Payee address;	City; State; Zip Code	
2000.00	Weslaco Texas		
- Maria Proposition - Control	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF		Digital Services	
EXPENDITURE	Fees	Digital Selvices	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
9/25/2023	Xavier Suarez		
Amount (\$)	Payee address;	City; State; Zip Code	
250.00	Weslaco Texas		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Contract Labor	GOTV Program	
	Check if travel outside of Texas. Complete Schedule T.	Check if Auslin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought Office held	
Date	Payee name		
9/27/2023	Jonathon Suarez		
Amount (\$)	Payee address;	City; State; Zip Code	
250.00	Weslaco Texas		
	Category (See Calegories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertisment	advertisment sign construction	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundralsing Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District Other (enter a category not listed above)		
1 Total pages Schedule F2:	2 FILER NAME David Suarez		3 Filer ID (Ethics Commission Filers)		
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS			\$		
5 Date 9/28/2023	6 Payee name Brand Booster				
7 Amount (\$)	8 Payee address;	City;	State; Zip Code		
5800	McAllen, Texas				
9 TYPE OF EXPENDITURE	Political Non-Political				
10	(a) Category (See Categories listed at the top of this	schedule) (b) Description			
PURPOSE OF EXPENDITURE	advertisment propoganda	Signs and prin	nt material		
	(c) Check if travel outside of Texas. Complete S	Schedule T. Check if A	ustin, TX. officeholder living expense		
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
Date	Payee name				
^{Date} 9/28/2023	FLJ Productions				
Amount (\$)	Payee address;	City;	State; Zip Code		
2500	Pharr, Texas				
TYPE OF EXPENDITURE	Political	Non-Political			
DUDDOG	Category (See Categories listed at the top of this	schedule) Description			
PURPOSE OF EXPENDITURE	Film productions	video and pl	video and photography services		
	Check if travel outside of Texas. Complete	Schedule T. Check if /	Austin, TX, officeholder living expense		
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					