

FORM C/OH
COVER SHEET PG 1

Revised 1/1/2024

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT****FORM C/OH
COVER SHEET PG 2****15 C/OH NAME****16 Filer ID (Ethics Commission Filers)****17 CONTRIBUTION
TOTALS****1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR
CONTRIBUTIONS MADE ELECTRONICALLY)**

\$

**2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)**

\$

8,315.69**EXPENDITURE
TOTALS****3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.**

\$

4. TOTAL POLITICAL EXPENDITURES

\$

13,466.47**CONTRIBUTION
BALANCE****5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY
OF REPORTING PERIOD**

\$

**OUTSTANDING
LOAN TOTALS****6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD**

\$

18 SIGNATURE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

Please complete either option below:**(1) Affidavit****NOTARY STAMP/SEAL**Sworn to and subscribed before me by _____ this the _____ day of _____,
20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn DeclarationMy name is Joseph Rodriguez, and my date of birth is [REDACTED].My address is 2823 Farragut St, Dallas, TX, 75215, USA.

(street)

(city)

(state)

(zip code)

(country)

Executed in Dallas County, State of Texas, on the 26 day of April, 2024.

(month)

(year)


Signature of Candidate/Officeholder (Declarant)

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

| | | |
|-----|---|--------------|
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 8,315.69 |
| 2. | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ |
| 3. | SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ |
| 4. | SCHEDULE E: LOANS | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ 13,466.47 |
| 6. | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS | \$ |
| 10. | SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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

The Instruction Guide explains how to complete this form.

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

Joseph Rodriguez

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

03/26/2024

5 Full name of contributor

Yanela Montoya

out-of-state PAC (ID#:

6 Contributor address;

City;

State;

Zip Code

1600 Abrams Road, Dallas, TX 75214

7 Amount of contribution (\$)

47.37

8 Principal occupation / Job title (See Instructions)

Non Profit

9 Employer (See Instructions)

Date

03/26/2024

Full name of contributor

Mallory Morris

out-of-state PAC (ID#:

Contributor address;

City;

State;

Zip Code

3560 Alma Rd Apt 925, Richardson, TX 75080

Amount of contribution (\$)

49.63

Principal occupation / Job title (See Instructions)

Non Profit

Employer (See Instructions)

Date

03/27/2024

Full name of contributor

Kevin McGlinchey

out-of-state PAC (ID#:

Contributor address;

City;

State;

Zip Code

4654 Belclaire Ave, Dallas, TX 75209

Amount of contribution (\$)

476.45

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03/27/2024

Full name of contributor

Vanessa Pacheco

out-of-state PAC (ID#:

Contributor address;

City;

State;

Zip Code

502 S Grove Rd, Dallas, TX 75081

Amount of contribution (\$)

95.05

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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: |
| 2 FILER NAME Joseph Rodriguez | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/28/2024 | 5 Full name of contributor out-of-state PAC (ID#: Melanie Robinson 6 Contributor address; City; State; Zip Code 5555 Amesbury Drive Apt 1212, Dallas, TX 75206 | 7 Amount of contribution (\$) 95.05 |
| 8 Principal occupation / Job title.(See Instructions) Non Profit | | 9 Employer (See Instructions) |
| Date 03/28/2024 | Full name of contributor out-of-state PAC (ID#: Lindsay Abernethy Contributor address; City; State; Zip Code 3808 Dunhaven Road, Dallas, TX 785220 | Amount of contribution (\$) 47.37 |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) |
| Date 03/28/2024 | Full name of contributor out-of-state PAC (ID#: Albert Mata Contributor address; City; State; Zip Code 101 West Davis Street Apt 1502, Dallas, TX 75208 | Amount of contribution (\$) 190.40 |
| Principal occupation / Job title (See Instructions) Consultant | | Employer (See Instructions) |
| Date 03/28/2024 | Full name of contributor out-of-state PAC (ID#: Ray De Los Santos Contributor address; City; State; Zip Code 4606 Cedar Springs RD Apt 1125, Dallas, TX 75219 | Amount of contribution (\$) 50.00 |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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: |
| 2 FILER NAME Joseph Rodriguez | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 03/30/2024 | 5 Full name of contributor out-of-state PAC (ID#: _____) Ross Whiteaker 6 Contributor address; City; State; Zip Code 5555 Amesbury Drive Apt 1212, Dallas, TX 75206 | 7 Amount of contribution (\$) 49.63 |
| 8 Principal occupation / Job title (See Instructions) Non Profit | | 9 Employer (See Instructions) |
| Date 03/28/2024 | Full name of contributor out-of-state PAC (ID#: _____) Lindsay Abernethy Contributor address; City; State; Zip Code 7021 Aztec Road Northeast, Albuquerque, NM 87110 | Amount of contribution (\$) 47.37 |
| Principal occupation / Job title (See Instructions) Pastor | | Employer (See Instructions) |
| Date 04/01/2024 | Full name of contributor out-of-state PAC (ID#: _____) Dan Micciche Contributor address; City; State; Zip Code 1140 Bally Mote Drive, Dallas, TX 75218 | Amount of contribution (\$) 238.07 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) |
| Date 04/02/2024 | Full name of contributor out-of-state PAC (ID#: _____) Diego Barrera Contributor address; City; State; Zip Code 11124 Yorkspring Dr, Dallas, TX 75218 | Amount of contribution (\$) 238.07 |
| Principal occupation / Job title (See Instructions) Architect | | Employer (See Instructions) |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**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:

2 FILER NAME

Joseph Rodriguez

3 Filer ID (Ethics Commission Filers)

4 Date

04/02/2024

5 Full name of contributor

out-of-state PAC (ID#: _____)

Leadership For Educational Equity

7 Amount of contribution (\$)

3,000.00

6 Contributor address;

City;

State;

Zip Code

25 Broadway 13th Floor, New York, NY 10004

8 Principal occupation / Job title (See Instructions)

Non Profit

9 Employer (See Instructions)

Date

04/04/2024

Full name of contributor

out-of-state PAC (ID#: _____)

Eric Moore

Amount of contribution (\$)

198.54

Contributor address;

City;

State;

Zip Code

7547 Midbury Dr, Dallas, TX 75230

Principal occupation / Job title (See Instructions)

Consultant

Employer (See Instructions)

Date

04/04/2024

Full name of contributor

out-of-state PAC (ID#: _____)

Michaela Gunter

Amount of contribution (\$)

99.26

Contributor address;

City;

State;

Zip Code

10106 Shady Oak Lane, Dallas, TX 75229

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

04/04/2024

Full name of contributor

out-of-state PAC (ID#: _____)

Lance Currie

Amount of contribution (\$)

496.34

Contributor address;

City;

State;

Zip Code

4468 Twin Post Road, Dallas, TX 75244

Principal occupation / Job title (See Instructions)

Lawyer

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**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: |
| 2 FILER NAME Joseph Rodriguez | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/05/2024 | 5 Full name of contributor out-of-state PAC (ID#: Leslie MacLean 6 Contributor address; City; State; Zip Code 3310 Fairmount St. Apt. 9D, Dallas, TX 75201 | 7 Amount of contribution (\$) 238.07 |
| 8 Principal occupation / Job title (See Instructions) Retired | | 9 Employer (See Instructions) |
| Date 04/06/2024 | Full name of contributor out-of-state PAC (ID#: Brianna Hobbs Contributor address; City; State; Zip Code 5340 Bourquin St, Dallas, 75210 | Amount of contribution (\$) 9.92 |
| Principal occupation / Job title (See Instructions) Teacher | | Employer (See Instructions) |
| Date 04/06/2024 | Full name of contributor out-of-state PAC (ID#: Eric Tuzin Contributor address; City; State; Zip Code 2123 Ramsey Avenue, Dallas, TX 75216 | Amount of contribution (\$) 24.82 |
| Principal occupation / Job title (See Instructions) Data Analyst | | Employer (See Instructions) |
| Date 04/09/2024 | Full name of contributor out-of-state PAC (ID#: Kelsey McKeag Contributor address; City; State; Zip Code 2121 North Pearl Street Suite 1100, Dallas, TX 75201 | Amount of contribution (\$) 238.07 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. | | |

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

Joseph Rodriguez

3 Filer ID (Ethics Commission Filers)

7 Amount of contribution (\$)

47.37

9 Employer (See Instructions)

Amount of contribution (\$)

95.05

Employer (See Instructions)

Amount of contribution (\$)

476.45

Employer (See Instructions)

Amount of contribution (\$)

95.05

Employer (See Instructions)

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME Joseph Rodriguez | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/16/2024 | 5 Full name of contributor out-of-state PAC (ID#: Yasmine Lockett 6 Contributor address; City; State; Zip Code 123 East Woodin Boulevard, Dallas, TX 75216 | 7 Amount of contribution (\$) 47.37 |
| 8 Principal occupation / Job title (See Instructions) Non Profit | | 9 Employer (See Instructions) |
| Date 04/17/2024 | Full name of contributor out-of-state PAC (ID#: Kate Hoffman Contributor address; City; State; Zip Code 3209 Armstrong Avenue, Dallas, TX 75205 | Amount of contribution (\$) 95.05 |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) |
| Date 04/17/2024 | Full name of contributor out-of-state PAC (ID#: Anthony Formicola Contributor address; City; State; Zip Code 1829 Jericho Drive, Warrington, PA 18976 | Amount of contribution (\$) 47.37 |
| Principal occupation / Job title (See Instructions) Doctor | | Employer (See Instructions) |
| Date 04/17/2024 | Full name of contributor out-of-state PAC (ID#: Gilberto Atayde Contributor address; City; State; Zip Code 830 Cavalier Dr, Arlington, TX 76017 | Amount of contribution (\$) 49.63 |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

| | | |
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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: |
| 2 FILER NAME Joseph Rodriguez | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/17/2024 | 5 Full name of contributor out-of-state PAC (ID#: Oscar Rodriguez 6 Contributor address; City; State; Zip Code 2206 SeEVERS Ave, Dallas, TX 75216 | 7 Amount of contribution (\$) 47.37 |
| 8 Principal occupation / Job title (See Instructions) Principal | | 9 Employer (See Instructions) |
| Date 04/17/2024 | Full name of contributor out-of-state PAC (ID#: John Yourse Contributor address; City; State; Zip Code 8523 Shagrock Lane, Dallas, TX 75238 | Amount of contribution (\$) 49.63 |
| Principal occupation / Job title (See Instructions) Educator | | Employer (See Instructions) |
| Date 04/17/2024 | Full name of contributor out-of-state PAC (ID#: Efrain Vega Contributor address; City; State; Zip Code 350 N SAINT PAUL ST Apt 2014, Dallas, TX 75201 | Amount of contribution (\$) 248.17 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) |
| Date 04/17/2024 | Full name of contributor out-of-state PAC (ID#: Marcos Palaez Contributor address; City; State; Zip Code 5519 Royal Meadow Ln, Arlington, TX 76017 | Amount of contribution (\$) 248.17 |
| Principal occupation / Job title (See Instructions) Accountant | | Employer (See Instructions) |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**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: |
| 2 FILER NAME Joseph Rodriguez | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/17/2024 | 5 Full name of contributor out-of-state PAC (ID#: Marie Appel 6 Contributor address; City; State; Zip Code 5626 PRESTON OAKS RD APT 6A, Dallas, TX 75254-8413 | 7 Amount of contribution (\$) 49.63 |
| 8 Principal occupation / Job title (See Instructions) Executive Director | | 9 Employer (See Instructions) |
| Date 04/18/2024 | Full name of contributor out-of-state PAC (ID#: Tamara Harrington Contributor address; City; State; Zip Code 8650 Southwestern Blvd, Dallas, TX 75206 | Amount of contribution (\$) 148.90 |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) |
| Date 04/18/2024 | Full name of contributor out-of-state PAC (ID#: Katie Newsome Contributor address; City; State; Zip Code 4400 West University Boulevard 17105, Dallas, TX 75209 | Amount of contribution (\$) 99.26 |
| Principal occupation / Job title (See Instructions) Executive Director | | Employer (See Instructions) |
| Date 04/18/2024 | Full name of contributor out-of-state PAC (ID#: Michael Juiliano Contributor address; City; State; Zip Code 2997 Lake Dr, Southlake, TX 76092 | Amount of contribution (\$) 248.17 |
| Principal occupation / Job title (See Instructions) Retired | | Employer (See Instructions) |

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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: |
| 2 FILER NAME Joseph Rodriguez | | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/22/2024 | 5 Full name of contributor out-of-state PAC (ID#: Tiffany Clark 6 Contributor address; City; State; Zip Code 717 Arbor Creek Dr, DeSoto, TX 75115 | 7 Amount of contribution (\$) 49.63 |
| 8 Principal occupation / Job title (See Instructions) Business Owner | | 9 Employer (See Instructions) |
| Date 04/22/2024 | Full name of contributor out-of-state PAC (ID#: Marshall Jeffries Contributor address; City; State; Zip Code 100 Abbott Park Rd, Abbott Park, IL 60064 | Amount of contribution (\$) 47.37 |
| Principal occupation / Job title (See Instructions) Lawyer | | Employer (See Instructions) |
| Date 04/22/2024 | Full name of contributor out-of-state PAC (ID#: Bryan Parra Contributor address; City; State; Zip Code 3406 Glenda, Grand Prairie, TX 75052 | Amount of contribution (\$) 100.00 |
| Principal occupation / Job title (See Instructions) Assistant Principal | | Employer (See Instructions) |
| Date 04/23/2024 | Full name of contributor out-of-state PAC (ID#: Cesar Flores Contributor address; City; State; Zip Code 5555 E Mockingbird, Dallas, TX 75206 | Amount of contribution (\$) 49.63 |
| Principal occupation / Job title (See Instructions) Non Profit | | Employer (See Instructions) |
| | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements. | | |

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**

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: | |
| 2 FILER NAME Joseph Rodriguez | | | | 3 Filer ID (Ethics Commission Filers) | |
| 4 Date 04/24/2024 | | 5 Full name of contributor Michera Brooks out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code 8215 Snapdragon Way, Dallas, TX 75252 | | 7 Amount of contribution (\$) 99.26 | |
| 8 Principal occupation / Job title (See Instructions) | | | 9 Employer (See Instructions) | | |
| Date | | Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code | | Amount of contribution (\$) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date | | Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code | | Amount of contribution (\$) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date | | Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code | | Amount of contribution (\$) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| Date | | Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code | | Amount of contribution (\$) | |
| Principal occupation / Job title (See Instructions) | | | Employer (See Instructions) | | |
| | | | | | |
| ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements. | | | | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 (enter a category not listed above)

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME Joseph Rodriguez | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/02/2024 | 5 Payee name Signage Systems | |
| 6 Amount (\$) 598.62 | 7 Payee address; City; State; Zip Code 7900 Ferguson Rd, Dallas, TX, 75228 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description Yard Signs |
| | (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 04/03/2024 | Payee name BGT Strategies | |
| Amount (\$) 3.00 | Payee address; City; State; Zip Code 1500 Pecos St #4, Dallas, TX 75204 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Consulting Expense | Description Campaign Consulting |
| | 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 04/05/2024 | Payee name Campaign Verify | |
| Amount (\$) 95.00 | Payee address; City; State; Zip Code 1215 31ST STREET NW PO BOX 3554 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) OTHER | Description Voter files |
| | 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 | | |

**POLITICAL EXPENDITURES MADE
FROM POLITICAL CONTRIBUTIONS**

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME Joseph Rodriguez | 3 Filer ID (Ethics Commission Filers) |
| 4 Date 04/11/2024 | 5 Payee name Target Leads | |
| 6 Amount (\$) 5,559.97 | 7 Payee address; City; State; Zip Code 959 W Ralph Hall Pkwy Suite 101, Rockwall, TX 75032 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Mailers |
| | (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 04/15/2024 | Payee name Squarespace | |
| Amount (\$) 35.18 | Payee address; City; State; Zip Code 8 Clarkson St New York, NY 10014, USA | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Website |
| | 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 04/22/2024 | Payee name Target Leads | |
| Amount (\$) 1,506.83 | Payee address; City; State; Zip Code 959 W Ralph Hall Pkwy Suite 101, Rockwall, TX 75032 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Mailers |
| | 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 | | |

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|----------------------------|----------------------------------|---------------------------------------|
| 1 Total pages Schedule F1: | 2 FILER NAME Joseph Rodriguez | 3 Filer ID (Ethics Commission Filers) |
|----------------------------|----------------------------------|---------------------------------------|

| | |
|----------------------|------------------------------|
| 4 Date 04/22/2024 | 5 Payee name Target Leads |
|----------------------|------------------------------|

| | |
|---------------------------|---|
| 6 Amount (\$) 2,657.01 | 7 Payee address; City; State; Zip Code 959 W Ralph Hall Pkwy Suite 101, Rockwall, TX 75032 |
|---------------------------|---|

| | | |
|---------------------------------------|---|----------------------------|
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description Mailers |
| | (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 |
|---|-------------------------------|---------------|-------------|

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|--------------------|--------------------------|
| Date 04/22/2024 | Payee name Mail Chimp |
|--------------------|--------------------------|

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|----------------------|---|
| Amount (\$) 13.86 | Payee address; City; State; Zip Code 405 N Angier Ave. NE. Atlanta, GA 30308 |
|----------------------|---|

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| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description Email Platform |
| | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |

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|---|-------------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
|---|-------------------------------|---------------|-------------|

| | |
|------|------------|
| Date | Payee name |
|------|------------|

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| Amount (\$) | Payee address; City; State; Zip Code |
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|------------------------------|---|-------------|
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) | Description |
| | Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense | |

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|---|-------------------------------|---------------|-------------|
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought | Office held |
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED