CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages file	ed:	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST	MI	OFFICE	USE ONLY
NAME	Mr.	Michael	U	Date Received	
	NICKNAME	LAST Villarreal	SUFFIX		
4 CANDIDATE/	ADDRESS / PO BOX;		CITY; STATE; ZIP CODE		
OFFICEHOLDER MAILING ADDRESS		o St. San Antonio, TX 7			
Change of Address					
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (210) 3	PHONE NUMBER 93-8937	EXTENSION	Date Hand-delivered	
6 CAMPAIGN TREASURER	MS / MRS / MR	FIRST	MI	Receipt #	Amount \$
NAME		Julian		Date Processed	
	NICKNAME	LAST Trevino	SUFFIX	Date Imaged	
	0.70557 4000500		NUTE //	07475	710.0005
7 CAMPAIGN TREASURER ADDRESS		(NO PO BOX PLEASE); APT / S n, San Antonio, TX 78204		STATE;	ZIP CODE
(Residence or Business)	_				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
FIIONE	(210) 3	26-5088			
9 REPORT TYPE	January 15	X 30th day before e	election Runoff	15th day aft treasurer ap (Officeholde	
	July 15	8th day before ele	ection Exceeded Modified Reporting Limit	Final Report	(Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year	Month	Day Year	
0012.123	2	10 / 25	THROUGH 3	24 25	
11 ELECTION	ELECTION DA		ELECTION TYPE		
	Month Day	Year Primary	Runoff Other Description		
	5 / 3 /	25 X General	Special		
12 OFFICE	OFFICE HELD (if any)	•	13 OFFICE SOUGHT (if known	n)	
			SAISD Trustee 1		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	CEHOLDER. THESE EXPENDITURE	ACCEPTED OR POLITICAL EXPENDITURES N S MAY HAVE BEEN MADE WITHOUT THE CAN. RED TO REPORT THIS INFORMATION ONLY IF 1	DIDATE'S OR OFFICEHOL	DER'S KNOWLEDGE OR
COMMITTEE(3)	COMMITTEE TYPE	COMMITTEE NAME San Antonio Kid	s First PAC		
	GENERAL	COMMITTEE ADDRESS			
Additional Pages			gh Ave. San Antonio, TX 78212		
	SPECIFIC	COMMITTEE CAMPAIGN TRE Sarah Harte	EMOUNEK NAME		
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS		
	4007 McCullough Ave. San Antonio, TX 78212				
		GO TO	PAGE 2		
		90 10	rage 4		

0	N FINANCE REPORT	COVER SHEET PG 2			
15 C/OH NAME		16 Filer ID (Ethics Commission Filers)			
Mich	ael U. Villarreal				
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$			
	\$ 19,941.47				
EXPENDITURE TOTALS	\$				
	4. TOTAL POLITICAL EXPENDITURES	\$ 15,357			
CONTRIBUTION BALANCE	1 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	* THE \$			
	swear, or affirm, under penalty of perjury, that the accompanying report is true quired to be reported by me under Title 15, Election Code. **Michael U Ville**				
		ndidate or Officeholder			
	Please complete either option below	r:			
(1) Affidavit					
NOTARY STAMP/SEA	L				
Sworn to and subscribed	before me by this the day of . 20	. to certify which, witness my hand			

Printed name of officer administering oath OR

(2) Unsworn Declaration

Signature of officer administering oath

and seal of office.

My name is Michael U Villarreal, and my date of birth is August 19, 1971. My address is 1140 S. Laredo St. San Antonio, TX 78204

Executed in Bexar County, State of Texas, on the 3rd day of April, 2025.

Michael U Villarreal

Signature of Candidate/Officeholder (Declarant)

Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME	mmission Filers)	
	Michael U. Villarreal		
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 19,941.47	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE E: LOANS	\$	
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CO	^{\$} 15,357	
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL	\$	
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUN	\$	
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	\$	
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	IONS RETURNED	\$

SCHEDULE A1

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

	The	Instruction Guide explains how	1 Total pages Schedule A1:		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
		Michael U. Villarreal			
4	Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
		Daniel Lopez			
	2-10-25	6 Contributor address;	City;	State; Zip Code	500
		202 Delaware	San A	Antonio, TX 78210	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
		Retired			
	Date	Full name of contributor	Out-of-state PAC	C (ID#:)	A
	Date	SA Kids First		, (2.11)	Amount of contribution (\$)
	2-27-25		0''		
	2-21-25	Contributor address;	City;	State; Zip Code	10,891.47
		4007 McCullough	San Anton	io, TX 78204	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
		Julia Birge			<i>.</i> ,
	2-28-25	Contributor address;	City;	State; Zip Code	
	2 20 20	·	•		100
		160 Olde Mill Circle Sout	h Ir	ndianapolis IN 46260	
	Principal occup	pation / Job title (See Instructions)		Employer (See	
		Not Employed		Instructions)	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
		John Doski			
	3-1-25	Contributor address;	City;	State; Zip Code	250
		309 King William	Sar	n Antonio, TX 78204	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
		Pediatric Surgeon		Methodist Healthcare	9

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE A1

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	The	Instruction Guide explains how to complete	1 Total pages Schedule A1:	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		Michael U. Villarreal		
4	Date	5 Full name of contributor out-of-st	ate PAC (ID#:)	7 Amount of contribution (\$)
		Laura Davenport		
	2-10-25	6 Contributor address; City;	State; Zip Code	25
		510 Briar Oak	San Antonio, TX 78216	
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruc	etions)
		Educator	Alamo Colleges	
	Date	Full name of contributor	ate PAC (ID#:)	Amount of contribution (\$)
		Emily Bieser		7 th out of 35 th 35 th (4)
	2-1-25	Contributor address City;	State; Zip Code	
		Contributor address City,	State, Zip Code	50
		203 W Johnson San A	Antonio, TX 78204	
Principal occupation / Job title (See Instructions) Employer (See Instruc			tions)	
		EducEducatorator	SSAISDAISD	
	Date	Full name of contributor	ate PAC (ID#:)	Amount of contribution (\$)
		Dina Toland		
	2-16-25	Contributor address; City;	State; Zip Code	
	0 _0			25
		720 E Guenther StE Guenther St	San Antonio, TX 78210	
	Principal occup	eation / Job title (See Instructions)	Employer (See Instru	ctions)
		EduTeachercator	SSAISDAISD	
	Date	Full name of contributor out-of-st	ate PAC (ID#:)	Amount of contribution (\$)
		Nicole Foy		
	2-16-25	Contributor address; City;	State; Zip Code	150
		135 E Magnolia	SSan Antonio, TX 78212	
	Principal occup	ation / Job title (See Instructions)	Employer (See Instruc	ctions)
		DirecDirectortor	Women's Global Co	onnection
			1	

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SCHEDULE A1

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The	Instruction Guide explains how	1 Total pages Schedule A1:		
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
	Michael U. Villarreal			
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
	Janie Barrera			
2-17-25	6 Contributor address;	City;	State; Zip Code	100
	228 Washington	San A	Antonio, TX 78204	
8 Principal occu	pation / Job title (See Instructions)			tion o)
6 Filicipal occu			9 Employer (See Instruc	•
	PresiCEOdent CEO		Kirpa Tech Kirpa Tech	l
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	T. Lacad			
2-21-25	Eyole M Mbongo	City;	State; Zip Code	
	Contributor address;	Contributor address;		50
	6927 Scenic Sunset	San Anton	io 78249	
			Employer (See Instruc	tions)
Legislative Assistantt UState Of TexasS				louse of
Date	Full name of contrib	utor out-of-state PAC	Representatives	Amount of contribution (\$)
	Sarah McLornan			
2-22-21-25	Saran McLoman	City;	State; Zip Code	
2 22 21 20	445 Dalama Du	-	•	250
	115 Paloma Dr	Sa	an Antonio, TX 78212	
Principal occu	pation / Job title (See Instructions)		Employer (See	
	CounCouncil Aidecil Aide	9	Instructions) CCOSA	OSA
Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	Zet Baer		,	, ,
		City;	State; Zip Code	100
22-22-25	Contributor address;			100
	1830 E Pyron	SSa	an Antonio, TX 78223	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
	Not ENot Employedmployed	1		

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SCHEDULE A1

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	The	Instruction Guide explains how	1 Total pages Schedule A1:		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
		Michael U. Villarreal			
4	Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
		Adele Barnett Mueschke			
	2-22-25	6 Contributor address;	City;	State; Zip Code	100
		114 Leopold St	San A	Antonio, TX 78210	
_	D :	-			
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc CMO	tions)
		Educator		OIVIO	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	2-24-25	Daryl Klecka	City; State; Zip Code		
		Contributor address;	-		1000
		13002 Country Glade	San Anton	io, TX 78216	
Principal occupation / Job title (See Instructions)			Employer (See Instruc	tions)	
		Electrician		Self Employed	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
					(,
	0.00.05	Gerald Lee	City;	State; Zip Code	
	2-26-25	Contributor address;	City,	State, Zip Gode	100
		18907 Calle Cierra	Sa	n Antonio, TX 78258	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
		Consultant		Andrade	
	Date	Full name of contributor	□ out of state PAC	C (ID#:)	Amount of contribution (\$)
		Travis Cox	Unit-of-state PAC) (ID#)	Amount of contribution (\$\psi\$)
		Travis Cox	City;	State; Zip Code	400
	2-27-25	Contributor address;	City,	State, Zip Code	100
		8503 Oak Cliff	Sar	Antonio, TX 78230	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
		Senior Risk Manager		USAA	

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SCHEDULE A1

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	The	Instruction Guide explains how	1 Total pages Schedule A1:		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
		Michael U. Villarreal			
4	Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
		Maria Dannana			
	2-27-25	Mario Barrera	City;	State; Zip Code	1000
		6 Contributor address;	San A	Antonio, TX 78212	
		135 W. Gramercy Place	Carry		
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	,
		Attorney		Norton Rose Fulbright U	S LLP
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	3-1-25	Blakely Fernandez	City;	State; Zip Code	
		Contributor address;	Oity,	State, Zip Gode	500
	13300 Convent St. Ste 2700 San Antonio, TX 78205			io, TX 78205	
Principal occupation / Job title (See Instructions)			Employer (See Instruc	tions)	
		Attorney		Bracewell LLP	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
		Sarah Sherwood			
	3-1-25		City;	State; Zip Code	
		Contributor address;			500
		308 Cedar St	Sa	n Antonio, TX 78210	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instru	ctions)
		Consultant		Self Employed	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
		Rene Alcala			
	3-2-25	Contributor address;	City;	State; Zip Code	50
		13527 Orchard Ridge	Sar	n Antonio, TX 78231	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
		Not Employed			

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	The	Instruction Guide explains how	1 Total pages Schedule A1:		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
		Michael U. Villarreal			
4	Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
8	3-2-25 Principal occu	Elena Serna-Wallender 6 Contributor address; 455 E. Rosewood Ave. pation / Job title (See Instructions)	City; San A	State; Zip Code Antonio, TX 78212 9 Employer (See Instruc	100 tions)
		Project Manager		MDRC	
	Date	Full name of contributor	out-of-state PAC	(ID#:)	Amount of contribution (\$)
	3-3-25	Omar Gonzalez Contributor address; 304 Sadie St	City; San Antoni	State; Zip Code	100
	Principal occur	pation / Job title (See Instructions)	Can Antoni	,	#:)
Real Estate		Employer (See Instruc		uons)	
		iveal Estate		Oxbow	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	3-5-25	Ruben Cuero Contributor address; 105 San Arturo St	City; Sa	State; Zip Code n Antonio, TX 78210	150
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
		Not Employed		Not Employed	
	Date	Full name of contributor Erin Strauss	out-of-state PAC		Amount of contribution (\$)
	3-2-25	Contributor address;	City;	State; Zip Code	100
		334 King William	Sar	Antonio, TX 78204	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
		Not Employed			

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SCHEDULE A1

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	The	Instruction Guide explains how	1 Total pages Schedule A1:		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
		Michael U. Villarreal			
4	Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
	3-7-25	Robert Puente	City;	State; Zip Code	500
		6 Contributor address;	•	, ,	
		8138 Donore PI	San A	Antonio, TX 78229	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
		Project Manager		MDRC	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	3-7-25	Diego Bernal Contributor address;	City;	State; Zip Code	300
		7211 Dubies	San Anton	io, TX 78216	
Principal occupation / Job title (See Instructions)		Employer (See Instruc		tions)	
		State Representative		State Of Texas	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	3-11-25	Pat Frost Contributor address; 520 Geneseo Road	City; Sa	State; Zip Code in Antonio, TX 78209	250
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
		Not Employed		Not Employed	,
	Date	Full name of contributor Mike Beldon	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	3-11-25	Contributor address;	City;	State; Zip Code	500
		34 Westelm Circle	Sar	Antonio, TX 78230	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
		Chairman		Beldon Roofing	

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SCHEDULE A1

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	The	Instruction Guide explains how	1 Total pages Schedule A1:		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
		Michael U. Villarreal			
4	Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
		Mod Long			
	3-14-25	Neel Lane	City;	State; Zip Code	500
		6 Contributor address;	-	, , ,	
_		626 Mission Street	San A	Antonio, TX 78210	
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instruc	tions)
		Attorney		Norton Rose	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
					•
	3-17-25	James Lazurus	City;	State; Zip Code	
		Contributor address;	Oity,	State, 2ip oode	100
		631 East Guenther St	San Anton	io, TX 78210	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
		Not Employed		Not Employed	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
		Molly Cox			
	3-21-25	Contributor address;	City;	State; Zip Code	400
		122 Jeanette Dr	0-	Antonio TV 70016	100
	Principal occur	pation / Job title (See Instructions)	58	n Antonio, TX 78216	
	Fillicipal occup	·		Employer (See Instruc	ctions)
		Consultant		Self Employed	
	Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
		Jordan Handler			
	3-24-25	Contributor address;	City;	State; Zip Code	100
		601 Nolan St	Sar	n Antonio, TX 78202	
	Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	tions)
		Real Estate		Latke Enterprises	
	<u> </u>				

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SCHEDULE A1

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

The	Instruction Guide explains how	form.	1 Total pages Schedule A1:	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Michael U. Villarreal			
4 Date	5 Full name of contributor	out-of-state PAC	C (ID#:)	7 Amount of contribution (\$)
3-24-25	Toni Van Buren 6 Contributor address;	City;	State; Zip Code	250
	115 Schreiner Place	San <i>F</i>	Antonio, TX 78212	
8 Principal occu	pation / Job title (See Instructions) Not Employed		9 Employer (See Instruct Not Employed	tions)
Date	Rex M. Amini	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
3-17-25	Contributor address;	City;	State; Zip Code	1000
	1803 Broadway	San Antonio T	X 78215	
Principal occupation / Job title (See Instructions)			Employer (See Instruct	tions)
	Attorney			
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Principal occup	pation / Job title (See Instructions)		Employer (See Instruc	ctions)
	Real Estate		The NRP Group	,
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City;	State; Zip Code	
Princ	ipal occupation / Job title		Employer (See	
	(See Instructions)		Instructions)	

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NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

			-		
The Instruction Guide explains how to complete this form.			1 Total pages Schedule A2:		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRII	BUTIONS	\$		
5 Date	6 Full name of contributor)	8 Amount of Contribution \$	9 In-kind contribution description	
	7 Contributor address; City; State;	Zip Code	Check if travel outsi	 de of Texas. Complete Schedule T.	
10 Principal occ	supation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employ	er (FOR NON-JUDICI	AL)(See Instructions)	
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contrib	13 Contributor's job title (FOR JUDICIAL) (See Instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firr	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor)	Amount of Contribution \$	In-kind contribution description	
	Contributor address; City; State;	Zip Code	Check if travel outsi	 de of Texas. Complete Schedule T.	
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	Employ	er (FOR NON-JUDICI		
Contributor's	principal occupation (FOR JUDICIAL)	Contrib	utor's job title (FOR JU	IDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
	ATTACH ADDITIONAL COPIES OF 1	THIS SCHEDI	ULE AS NEEDED		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

PLEDGED CONTRIBUTIONS

SCHEDULE B

	The	Instruction Guide explains how to complete this	form.	1 Total pages Sched	ule B:
P F	ILER NAME			3 Filer ID (Ethics Commission Filers)	
	1	Michael U. Villarreal			
Т	OTAL OF	UNITEMIZED PLEDGES		\$	
5 D	ate	6 Full name of pledgor ☐ out-of-state PAC (ID#:		8 Amount of Pledge \$	9 In-kind contribution description
			e; Zip Code		
				Check if travel outs	I . ide of Texas. Complete Schedule T
0 F	rincipal occu	pation / Job title (See Instructions)	11 Employer (See	Instructions)	
	ate	Full name of pledgor)	Amount of Pledge \$	In-kind contribution description
		Pledgor address; City; Stat	e; Zip Code		
				Check if travel outs	. ide of Texas. Complete Schedule T.
Pı	incipal occup	pation / Job title (See Instructions)	Employer (See	Instructions)	
	ate	Full name of pledgor)	Amount of Pledge \$	In-kind contribution description
		Pledgor address; City; Stat	re; Zip Code		
				Check if travel outs	ide of Texas. Complete Schedule T.
Р	rincipal occu	pation / Job title (See Instructions)	Employer (See	: Instructions)	
D	ate	Full name of pledgor out-of-state PAC (ID#:)	Amount of Pledge \$	In-kind contribution description
		Pledgor address; City; State;	Zip Code		;
				Check if travel outs	I . ide of Texas. Complete Schedule T.
Pı	incipal occup	pation / Job title (See Instructions)	Employer (See	: Instructions)	

LOANS SCHEDULE E

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

	if the requested information is not applicable, DO NOT include this page in the report.					
	The	Instruction Guide explains how to comple	ete this form.	1 Total pages Schedule E:		
2	FILER NAME			3 Filer ID (Ethics Commission Filers)		
4	4 TOTAL OF UNITEMIZED LOANS			\$		
5	Date of loan	7 Name of lender ut-of-state F	PAC (ID#:)	9 Loan Amount (\$)		
6	Is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate 11 Maturity date		
12	Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)			
14	Description of Coll	ateral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)		
16	GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)		
	not applicable	18 Guarantor address; City;	State; Zip Code			
20	Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)	I		
	Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)		
	Is lender a financial Institution?	Lender address; City;	State; Zip Code	Interest rate		
	Y N			Maturity date		
	Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)			
Description of Collateral		ateral	Check if personal fundaccount (See Instruct	ds were deposited into political ions)		
	GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)		
		Guarantor address; City;	State; Zip Code			
	not applicable					
	Principal Occupation	on (See Instructions)	Employer (See Instructions)			
		ATTACH ADDITIONAL CODE	ES OE TUIS SCUEDI II E AS NEI	-DED		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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

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 o	complete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
	Michael U. Villarreal			
4 Date	5 Payee name			
2-24-25	Texas Democratic Party			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
440	PO Box 15707, Austin, TX 78761			
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Fees	Voter Data		
	(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			
2-28-25	Wix.com			
Amount (\$)	Payee address;	City;	State; Zip Code	
377	100 Gansevoort Street, New York, NY 100	014		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF				
EXPENDITURE	Advertising Expense	Website		
	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			
3-1-25	Slab Cinema			
Amount (\$)	Payee address;	City;	State; Zip Code	
200	134 Blue Star, San Antonio, TX 78210			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Event Expense	Launch Eve	nt	
	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	
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NE	EDED	

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

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 c	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethic	s Commission Filers)
	Michael U. Villarreal			
4 Date	5 Payee name			
3-12-25	Prestige Printing			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
685	8 Burwood Ln, San Antonio, TX 7821	6		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Doorhangers		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
3-5-25	Prestige Printing			
Amount (\$)	Payee address;	City;	State;	Zip Code
631	8 Burwood Ln, San Antonio, TX 78216			
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF	Advantising Funance	Postcards		
EXPENDITURE	Advertising Expense	Posicards		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder living	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
3-7-25	Alamo Mail House			
Amount (\$)		City;	State;	Zip Code
2911	13114 Lookout Run, San Antonio, TX			
	Category (See Categories listed at the top of this sch	edule) Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Mailer		
	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	

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

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 c	omplete this form.	
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Michael U. Villarreal		
4 Date	5 Payee name		
3-20-25	Vanessa Velasque		
6 Amount (\$)	7 Payee address;	City;	State; Zip Code
342	PO Box 23224 San Antonio TX 78223	3	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Advertising Expense	Photos	
	(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		
3-21-25	Jennifer Longoria		
Amount (\$)	Payee address;	City;	State; Zip Code
1500	403 Basswood Dr San Antonio, TX 78213		
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF		5	
EXPENDITURE	Consulting	Data Manager	nent
	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
D-4-	Payee name		
Date	rayee hame		
Amount (\$)		City;	State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this scho	_{edule)} Description	
	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
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEI	EDED