FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00062322 76 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Michael Paul NAME Date Received **ELECTRONICALLY FILED** 07/17/2023 NICKNAME LAST **SUFFIX** Gomez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE CITY; **OFFICEHOLDER** 500 Cordell St. #A MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77009 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Daniel NAME NICKNAME LAST **SUFFIX** Ramirez STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE **CAMPAIGN** APT / SUITE #; CITY; STATE; **TREASURER** 150 W. Parker Rd. Fl 3 **ADDRESS** (Residence or Business) Houston, TX 77056 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 493-5529 **PHONE** REPORT TYPE January 15 30th day before election 15th day after campaign treasurer Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE

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GO TO PAGE 2

Forms provided by Texas Ethics Commission

District Judge District 129 Harris

District Judge District 129

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 76

13 C / OH NAME	Gomez, Michael Pau	(The Honorable)	14 Filer ID 00062322	(Ethics Com	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without I officeholders are required to report this informatio	the candidate's or offic	eholder's kno	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMBAIGN TREACURER ARREST	00		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THAI ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
	2. TOTAL POLIT	ICAL CONTRIBUTIONS		\$	109,797.88
EVENDITUE	`	PLEDGES, LOANS, OR GUARANTEES OF LOAN	IS)	ļ*	,
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	45,855.73
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	207,879.65
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
		The Honora	able Michael Paul Go	omez	
		Signature o	f Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
Sworn to and subso	cribed before me, by the s	aid	, this the		day
of	, 20, to ce	ertify which, witness my hand and seal of office.			
Signature of office	cer administering oath	Printed name of officer administering oath	Title of office	er administeri	ng oath
Signature of Office	or commissioning outif	. The diame of officer duffinistering oddi	The of office	. administen	ng outi

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

		3 of 76		
18 FILER NAME Gomez, Michael Paul (The Honora	uble)	19 Filer ID 00062322	(Ethics	Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SI	JBTOTAL AMOUNT
1. X SCHEDULE A(J)1: MON	ETARY POLITICAL CONTRIBUTIONS (JUDI	ICIAL)	\$	109,238.94
2. X SCHEDULE A2: NON-M	DNETARY (IN-KIND) POLITICAL CONTRIBU	JTIONS	\$	558.94
3. SCHEDULE B(J): PLEDO	GED CONTRIBUTIONS (JUDICIAL)		\$	
4. SCHEDULE E(J): LOAN:	G (JUDICIAL)		\$	
5. X SCHEDULE F1: POLITIC	CAL EXPENDITURES FROM POLITICAL CO	NTRIBUTIONS	\$	29,276.21
6. SCHEDULE F2: UNPAID	INCURRED OBLIGATIONS		\$	
7. SCHEDULE F3: PURCH	ASE OF INVESTMENTS FROM POLITICAL	CONTRIBUTIONS	\$	
8. X SCHEDULE F4: EXPEN	DITURES MADE BY CREDIT CARD		\$	16,579.52
9. SCHEDULE G: POLITIC	AL EXPENDITURES FROM PERSONAL FU	NDS	\$	
10. SCHEDULE H: PAYMEN	T FROM POLITICAL CONTRIBUTIONS TO	A BUSINESS OF C/OH	\$	
11. SCHEDULE I: NON-POLI	TICAL EXPENDITURES FROM POLITICAL (CONTRIBUTIONS	\$	
12. SCHEDULE K: INTERES TO FILER	T, CREDITS, GAINS, REFUNDS, AND CONT	TRIBUTIONS RETURNED	\$	

	MONET	ARY POLITICAL CO	ONTRIBUTIC	ONS	SCHEDUL	≡ A(J)1
	The Instru	ction Guide explains how to	complete this fo	orm.	1 Total pages Schedule A Sch: 1/36 Rpt: 4/76	(J)1:
2	FILER NAME Gomez, Mich	FILER NAME Gomez, Michael Paul (The Honorable)			3 Filer ID (Ethics Comm 00062322	ssion Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Adler, Jim 6 Contributor address; City; State; Zip Code Houston, TX 77027		7 Amount of Contribution (\$) \$5,000.00		
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	-	
	Attorney			Principal		
10		employer/law firm & Associates		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any))			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/22/2023	Agosto, Benny Contributor address; City; State Houston, TX 77002				\$2,500.00
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp	pouse (if any)	
	Abraham, W	atkins, Nichols, Sorrels, Agosto	& Frien			
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/16/2023	Ahmad, Zavitsanos & Mensii	ng, P.C.			\$5,000.00
		Contributor address; City; State Houston, TX 77010	; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	1	
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/36 Rpt: 5/76	
2	FILER NAME				3 Filer ID (Ethics Commission Filers)	
	Gomez, Mic	z, Michael Paul (The Honorable)		00062322		
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)	
	06/08/2023	Amaro, James			\$500.	00
		6 Contributor address; City; St	ate; Zip Code			
		Houston, TX 77008				
8	Contributor's	Principal Occupation		9 Contributor's Job Title	•	
	Attorney			Founder		
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)	_
	Amaro Law	Firm				
12	If contributor i	s a child, law firm of parent(s) (if a	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount of Contribution (\$)	=
	06/29/2023	Araujo, Jose Luis	_		\$100.	00
		Contributor address; City; St	ate; Zip Code			
		Houston, TX 77084				
	Contributor's	I Principal Occupation		Contributor's Job Title	_ L	
	IT Technicia			Project Director		
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)	_
	Harris Healt				, , , , , , , , , , , , , , , , , , , ,	
		s a child, law firm of parent(s) (if a	.nv)			_
			,			
-	Date	Full name of contributor	out-of-state PAC (ID#:_	\	Amount of Contribution (\$)	_
	06/30/2023	Balli, Celia	U out-oi-state FAC (ID#	J	\$250.	ററ
	00/00/2020	Contributor address; City; St	ato: Zin Codo			00
		Contributor address, City, St	ate, Zip Code			
		Houston, TX 77055				
_	Contributor's	Principal Occupation		Contributor's Job Title		
	Attorney	Filicipal Occupation		Vice President		
		omployor/low firm			ongues (if any)	
	KBR, Inc.	employer/law firm		Law firm of contributor's s	spouse (ii ariy)	
	if contributor i	s a child, law firm of parent(s) (if a	ny)			
_						
l						

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 3/36 Rpt: 6/76
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	ez, Michael Paul (The Honorable)		00062322	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	05/30/2023	Beck Redden, LLP			\$1,000.00
		6 Contributor address; City;	State; Zip Code		
		Houston, TX 77010			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	if any)		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/05/2023	Bosquez, Miranda	out or state 1740 (15m.	·	\$1,000.00
		Contributor address; City;	State; Zip Code		
		Houston, TX 77006			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Assistant	ттора Оссаратоп		Brand Ambassador	
-		employer/law firm		Law firm of contributor's s	pouse (if any)
	Farah Law	, ,			
	If contributor i	s a child, law firm of parent(s) (i	if any)	1	
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/26/2023	Bracewell PAC	_		\$1,000.00
		Contributor address; City;	State; Zip Code		
		Houston, TX 77002			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if any)		
L					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 4/36 Rpt: 7/76
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	Somez, Michael Paul (The Honorable)		00062322	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	06/29/2023 Bradley Arant Boult Cummings Texas PAC		\$1,000.00		
		6 Contributor address; City;	State; Zip Code		
		Dallas, TX 75270			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (if any)	<u> </u>	
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	Amount of Contribution (\$)
	06/22/2023	Bryant, Terry	U OUI-OI-SIAIE PAC (ID#.	J	\$600.00
	00/22/2020	Contributor address; City;	State: 7in Code		
			, June, 2, p 3333		
		Houston, TX 77024			
		Principal Occupation		Contributor's Job Title	
	Attorney			Owner	
		employer/law firm		Law firm of contributor's s	pouse (if any)
		Accident and injury Law	".f a.m. \\		
	ii contributor i	s a child, law firm of parent(s) (ıı any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/22/2023	Carter, Eric			\$5,000.00
		Contributor address; City;	State; Zip Code		
		Bellaire, TX 77401			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Owner	
		employer/law firm 		Law firm of contributor's s	pouse (if any)
	Carter Law I				
	If contributor i	s a child, law firm of parent(s) (ïf any)		
\vdash					

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1	al pages Schedule A(J): h: 5/36 Rpt: 8/76	1:
2	FILER NAME				1	er ID (Ethics Commissi	ion Filers)
		nael Paul (The Honorable)				062322	
4	Date 06/30/2023	5 Full name of contributor Cassin, Angeles6 Contributor address; City;	out-of-state PAC (ID#:_)	7 Am	ount of Contribution (\$)	\$100.00
		Bellaire, TX 77401					
8		Principal Occupation		9 Contributor's Job Title			
	Attorney			Shareholder			
10		employer/law firm		11 Law firm of contributor's sp	pouse (if	any)	
_	GreenbergT						
12	If contributor is	s a child, law firm of parent(s) (if	tany)				
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Am	ount of Contribution (\$)	
	06/13/2023	Cokinos, Young, PC	_ ` ` ·			· ,	\$1,000.00
		Contributor address; City;	State; Zip Code		"		
		Houston, TX 77010					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's s	nouse (if	anvl	
	Contributor 5	imployer/idw iiiii		Eaw min of contributor 3 3	pouse (ii	any)	
	If contributor is	s a child, law firm of parent(s) (if	fany)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	I Am	ount of Contribution (\$)	
	06/23/2023	Colon, Edgardo				(+)	\$1,000.00
		Contributor address; City;	State; Zip Code		-		
		Houston, TX 77007					
	Contributor's I	Principal Occupation		Contributor's Job Title	•		
	Attorney			Owner			
		employer/law firm		Law firm of contributor's sp	pouse (if	any)	
	Edgardo E. (
	If contributor is	s a child, law firm of parent(s) (if	fany)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 6/36 Rpt: 9/76
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	z, Michael Paul (The Honorable)		00062322	
4	Date 06/22/2023	5 Full name of contributor Cortes, Eddie6 Contributor address; City;	out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$250.00
		Houston, TX 77076			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Founder	
10		employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Self				
12	2 If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/20/2023	Coulter, Keith	_		\$150.00
		Contributor address; City;	State; Zip Code		··· <mark>·</mark>
		Houston, TX 77098			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Lawyer			Partner	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Coulter, P.C				
	If contributor i	s a child, law firm of parent(s) (i	f any)	<u> </u>	
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/21/2023	Cox, Collin			\$1,000.00
		Contributor address; City;	State; Zip Code		
		Houston, TX 77027			
	Contributor's	Principal Occupation		Contributor's Job Title	1
	Attorney			Partner	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Gibson, Dur	nn & Crutcher LLP			
	If contributor i	s a child, law firm of parent(s) (i	f any)	•	

	MONET	ARY POLITICAL CO	ONTRIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how t	o complete this fo	orm.		ges Schedule A(J)1 36 Rpt: 10/76	:
2	FILER NAME				3 Filer ID	(Ethics Commission	on Filers)
	Gomez, Mic	hael Paul (The Honorable)			000623	22	
4	Date 06/07/2023	Full name of contributor Davidson, Mindy Contributor address; City; State	out-of-state PAC (ID#:_ e; Zip Code		7 Amount	of Contribution (\$)	\$100.00
		Houston, TX 77005					
8	Contributor's	Principal Occupation		9 Contributor's Job Title			
	Attorney			Executive Director			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)		
	Houston Ba	Association					
12	If contributor i	s a child, law firm of parent(s) (if any	y)				
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount	of Contribution (\$)	
	06/28/2023	Davis, Joshua	_				\$500.00
		Contributor address; City; State	e; Zip Code		1		
		House TV 77002					
	0	Houston, TX 77002					
	Attorney	Principal Occupation		Contributor's Job Title Founder			
_		a manala y a milla y y Firma			(if)		
	Davis Law C	employer/law firm		Law firm of contributor's s	pouse (ii ariy)		
		•	۸				
	ii contributori	s a child, law firm of parent(s) (if any	y)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	06/29/2023	Flores, Rey					\$1,250.00
		Contributor address; City; Stat	e; Zip Code				
		Houston, TX 77010					
	Contributor's	Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			Partner			
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)		
	AZA Law Fi	m					
	If contributor i	s a child, law firm of parent(s) (if any	y)				

	MONET	ARY POLITICAL	. CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 8/36 Rpt: 11/76
2	FILER NAME				3 Filer ID (Ethics Commission Filers) 00062322
Ļ		hael Paul (The Honorable)			
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	:)	7 Amount of Contribution (\$)
	05/23/2023 Fogler Brar O'Neil & Gray LLP		\$1,000.00		
		6 Contributor address; City Houston, TX 77010	; State; Zip Code		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
ľ	Continuator 3	Throipal Occupation		5 Contributor 3 300 Title	
10) Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	2 If contributor i	s a child, law firm of parent(s)	(if any)	1	
	Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	06/13/2023	Garcia, Juan	out of state 1710 (157).		\$1,000.00
		Contributor address; City	· State: 7in Code		
		Katy, TX 77494			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney	•		Founding Partner	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Johnson Ga	rcia LLP			
	If contributor i	s a child, law firm of parent(s)	(if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	:)	Amount of Contribution (\$)
	06/22/2023	Garcia, Roland			\$500.00
		Contributor address; City	; State; Zip Code		
		Houston, TX 77042			
	Contributor's	Principal Occupation		Contributor's Job Title	1
	Attorney			Associate Attorney	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Greenberg 7	Γraurig			
	If contributor i	s a child, law firm of parent(s)	(if any)		
L					
l					

M	IONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
Tł	he Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 9/36 Rpt: 12/76
	FILER NAME Gomez, Michael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322	
4 Da			7 Amount of Contribution (\$) \$1,000.00		
		Houston, TX 77002			
8 Co	ontributor's	Principal Occupation		9 Contributor's Job Title	•
La	awyer			Partner	
	ontributor's ontributor's ontributor's ontributor's	employer/law firm ns LLP		11 Law firm of contributor's s	pouse (if any)
12 If (contributor i	s a child, law firm of parent(s) (if	any)		
Da	ato.	Full name of contributor	Out of state BAC (ID#:		Amount of Contribution (\$)
Date Full name of contributor out-of-state PAC (ID#: 06/27/2023 Gilman, Luke		J	\$250.00		
		Contributor address; City; 9	State; Zip Code		
		Houston, TX 77008			
Co	ontributor's	Principal Occupation		Contributor's Job Title	
At	torney			Partner	
Co	ontributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
Ja	ickson Wa	lker LLP			
If c	contributor i	s a child, law firm of parent(s) (if	any)		
Da	ate	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
06	6/26/2023	Guss, Stewart	_		\$2,500.00
		Contributor address; City; \$ Houston, TX 77070	State; Zip Code		•
	ontributor's	l		Contributor's Job Title	<u>l</u>
	torney	Principal Occupation		Owner	
Co	ontributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
St	ewart J. G	uss, Attorney at Law			
If c	contributor i	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	is form.	1 Total pages Schedule A(J)1: Sch: 10/36 Rpt: 13/76
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
		hael Paul (The Honorable)		00062322
4	Date	5 Full name of contributor out-of-state PAC (I	D#:)	7 Amount of Contribution (\$)
	06/22/2023	Gutierrez, Gloria		\$250.00
		6 Contributor address; City; State; Zip Code Houston, TX 77252		
Ļ	0		To 0 12 1 1 1 72	
8		Principal Occupation	9 Contributor's Job Title	
		IVESTIGATOR	Investigator	
10		employer/law firm	11 Law firm of contributor's s	spouse (if any)
	PI Quest			
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (I	D#·)	Amount of Contribution (\$)
	06/05/2023	Hagans, William)	\$500.00
	00/00/2020	Contributor address; City; State; Zip Code		
		Contributor address, City, State, Zip Code		
		Houston, TX 77006		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Partner	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Hagans Mor	ntgomery Hagans		
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
	06/13/2023	Hall, Benjamin		\$1,000.00
		Contributor address; City; State; Zip Code		···
		Contributor dudicess, City, State, 21p Code		
		Columbia, TX 77024		
_	0		Occasion de la Tida	
		Principal Occupation	Contributor's Job Title	
	Lawyer		Founder	
		employer/law firm	Law firm of contributor's s	spouse (if any)
	Hall Law Fir			
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 11/36 Rpt: 14/76
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322
4	Date 05/18/2023	5 Full name of contributor Hansen, Shelby6 Contributor address; City; SHouston, TX 77007	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$5.00
2	Contributor's I	Principal Occupation		9 Contributor's Job Title	
Ü	Fundraising	тпора Оссараноп		Finance Director	
10		employer/law firm		11 Law firm of contributor's sp	nouse (if any)
10	Strong Strate			TE Law IIIII of Contributor's Sp	louse (ii ariy)
12	If contributor is	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/22/2023	Hanszen LaPorte, LLP Contributor address; City; S	<u> </u>		\$1,000.00
		Houston, TX 77079		T	
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/21/2023	Havins, John Contributor address; City; S Houston, TX 77098	tate; Zip Code		\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title	
	Attorney			President	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Havins & As	sociates PC			
	If contributor is	s a child, law firm of parent(s) (if	any)		

	MONET	ARY POLITICAL CO	NTRIBUTIC	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how to	complete this fo	orm.	1 Total pages Schedule A(J)1: Sch: 12/36 Rpt: 15/76	_
2	FILER NAME Gomez, Mich	nael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322	
4	Date 06/09/2023	5 Full name of contributor Hawes, Randall6 Contributor address; City; State;Bellaire, TX 77401	out-of-state PAC (ID#:_ Zip Code)	7 Amount of Contribution (\$) \$1,000.0	0
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	1	_
	Attorney			Shareholder		
10	Contributor's e	employer/law firm ı Hrdlicka		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
	06/21/2023	Hayes, Valerie Contributor address; City; State; Kansas City, MO 64108			\$500.0 	0
	Contributor's F	Principal Occupation		Contributor's Job Title		_
	Administration			Office Administrator		
		employer/law firm		Law firm of contributor's sp	pouse (if any)	_
		y & Bacon LLP				
		s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
	05/23/2023	Haynes and Boone Political A Contributor address; City; State; Dallas, TX 75219			\$1,000.0	0
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)	_
	If contributor is	s a child, law firm of parent(s) (if any)				_

MONET	ARY POLITICAL CONT	RIBUTIONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to com	nplete this form.	1 Total pages Schedule A(J)1: Sch: 13/36 Rpt: 16/76
2 FILER NAME	hael Paul (The Honorable)		3 Filer ID (Ethics Commission Filers) 00062322
	·	Salata DAG (ID)	
4 Date 06/24/2023	06/24/2023 Hernandez, Ana		7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip C	code	
	Houston, TX 77251		
8 Contributor's State Repre	Principal Occupation sentative	9 Contributor's Job State Represent	
10 Contributor's State Repre	employer/law firm sentative	11 Law firm of contrib	utor's spouse (if any)
	s a child, law firm of parent(s) (if any)	L	
Date	Full name of contributor out-of	-state PAC (ID#:) Amount of Contribution (\$)
05/30/2023	Hicks Thomas LLP		\$500.00
	Contributor address; City; State; Zip C	ohde.	
	Houston, TX 77002		
Contributor's	I Principal Occupation	Contributor's Job	Title
Contributor's	employer/law firm	Law firm of contrib	utor's spouse (if any)
If contributor i	s a child, law firm of parent(s) (if any)	I	
Date	Full name of contributor out-of-	-state PAC (ID#:	
06/22/2023	Hinojosa, Richard		\$2,500.00
	Contributor address; City; State; Zip C	 Code	
	Houston, TX 77006		
	Principal Occupation	Contributor's Job	Γitle
Attorney		Owner	
	employer/law firm	Law firm of contrib	outor's spouse (if any)
Hinojosa La			
If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL (CONTRIBUTIO)NS		SCHEDU	LE	A(J)1
	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule Sch: 14/36 Rpt: 17/		1:
2	FILER NAME Gomez, Mich	hael Paul (The Honorable)			1	Filer ID (Ethics Com 00062322	miss	ion Filers)
4	Date 05/23/2023	Full name of contributor Hoover Slovacek, LLP Contributor address; City; St	out-of-state PAC (ID#:_		7	Amount of Contributio	n (\$)	\$1,000.00
		Houston, TX 77210						
8	Contributor's F	Principal Occupation		9 Contributor's Job Title				
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	e (if any)		
12	If contributor is	s a child, law firm of parent(s) (if a	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contributio	n (\$)	
	06/08/2023	Hunton Andrews Kurth Texas PAC Contributor address; City; State; Zip Code					\$2,500.00	
_	Houston, TX 77002 Contributor's Principal Occupation Contributor's Job Title			Contaileutorio Joh Titlo				
				Contributor's Job Title		_		
		employer/law firm		Law firm of contributor's sp	ous	e (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contributio	n (\$)	
	06/30/2023						\$2,500.00	
		Principal Occupation		Contributor's Job Title				
	Attorney			Founder				
		employer/law firm	!	Law firm of contributor's sp	ous	e (if any)		
		+ Associates, P.C.						
	If contributor is	s a child, law firm of parent(s) (if a	any)					

	MONET	ARY POLITICAL CON	ITRIBUTIC	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how to c	omplete this f	orm.	1 Total pages Schedule A(J)1: Sch: 15/36 Rpt: 18/76	_
2	FILER NAME Gomez, Mich	hael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322	
4	Date 06/22/2023	 5 Full name of contributor	ut-of-state PAC (ID#:_ ip Code)	7 Amount of Contribution (\$) \$50.0	– o
8	Contributor's I	I ≥rincipal Occupation		9 Contributor's Job Title		_
	Attorney			Professor of Law		
10		employer/law firm nern University		11 Law firm of contributor's sp	spouse (if any)	_
12	If contributor is	s a child, law firm of parent(s) (if any)				_
	Date	Full name of contributor 0	ut-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
	06/28/2023	Jefferson, Dale Contributor address; City; State; Z Houston, TX 77002			\$2,500.0	J
	Contributor's F	Principal Occupation		Contributor's Job Title		_
	Attorney			Managing Partner		
		employer/law firm		Law firm of contributor's sp	spouse (if any)	-
		re, Jefferson & Wisdom		·	, , , , , ,	
	If contributor is	s a child, law firm of parent(s) (if any)				_
	Date	Full name of contributor ou	ut-of-state PAC (ID#:_		Amount of Contribution (\$)	=
	06/13/2023	Kane Russell Coleman Logan I Contributor address; City; State; Z			\$1,000.0)
		Dallas, TX 75052				_
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 16/36 Rpt: 19/76
2	FILER NAME Gomez, Mich	hael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322
4	Date 05/23/2023	5 Full name of contributor Kherkher Garcia, LLP6 Contributor address; City; S	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$2,500.00
8	Contributor's F	Houston, TX 77098 Principal Occupation		9 Contributor's Job Title	
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	L	
	Date 06/29/2023	Full name of contributor Kim, John Contributor address; City; S	out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$1,000.00
	Contributor's I	Houston, TX 77006 Principal Occupation		Contributor's Job Title	
	Lawyer	Tincipal Occupation		Owner	
	Contributor's of	employer/law firm v Firm s a child, law firm of parent(s) (if a	any)	Law firm of contributor's sp	pouse (if any)
	Date 05/18/2023	Full name of contributor Kretzer, Seth Contributor address; City; S Houston, TX 77002	out-of-state PAC (ID#:_)	Amount of Contribution (\$) \$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	attorney			Owner	
	Law Office o	employer/law firm of Seth Kretzer s a child, law firm of parent(s) (if a	any)	Law firm of contributor's sp	oouse (if any)
		/\			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	ges Schedule A(J)1: /36 Rpt: 20/76	
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3 Filer ID 000623	(Ethics Commissio	n Filers)
4	Date 06/27/2023	5 Full name of contributor [Kroger, Elizabeth6 Contributor address; City; StaHouston, TX 77024	out-of-state PAC (ID#:_ te; Zip Code		7 Amount	of Contribution (\$)	\$250.00
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	<u> </u>		
•	Attorney	ттора Сосаранот		Partner			
10	Contributor's	employer/law firm ere, Jefferson & Wisdom		11 Law firm of contributor's sp	oouse (if any)		
12		s a child, law firm of parent(s) (if an	у)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	06/29/2023	Lam, Ethan Contributor address; City; Sta Katy, TX 77449				(,,	\$50.00
	Contributor's F	IPrincipal Occupation		Contributor's Job Title			
		cal Technologist		Technologist			
	Contributor's	employer/law firm		Law firm of contributor's sp	ouse (if any)		
	Memorial He	erman - Katy					
	If contributor is	s a child, law firm of parent(s) (if an	у)				
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount	of Contribution (\$)	
	06/22/2023	Law Office of Omar O Varg Contributor address; City; Sta Houston, TX 77074					\$500.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	l		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if an	у)				

MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 18/36 Rpt: 21/76
2 FILER NAME Gomez, Micl	hael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322
4 Date 06/22/2023	5 Full name of contributor Law Offices of Domingo 6 Contributor address; City;			7 Amount of Contribution (\$) \$2,500.00
	Dallas, TX 75243			
8 Contributor's F	Principal Occupation		9 Contributor's Job Title	
10 Contributor's 6	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if	any)		
Date 06/27/2023	Full name of contributor Leal, Sergio Contributor address; City;	out-of-state PAC (ID#:		Amount of Contribution (\$)
	Bellaire, TX 77401			
	Principal Occupation		Contributor's Job Title	
Attorney Contributor's	employer/law firm		Head of Compliance Law firm of contributor's s	nauca (if any)
Ericsson	employemaw mm		Law IIIII of Contributor 3 3	pouse (ii arry)
If contributor is	s a child, law firm of parent(s) (if	any)		
Date 06/30/2023	Full name of contributor Lewis, Charles Contributor address; City;	out-of-state PAC (ID#:_		Amount of Contribution (\$) \$20.00
	Houston, TX 77069			
	Principal Occupation		Contributor's Job Title	
Administration			Alternate Administrator	
	employer/law firm • Care & Services LLC		Law firm of contributor's s	pouse (if any)
	s a child, law firm of parent(s) (ii	any)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1	L
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 19/36 Rpt: 22/76	
2	FILER NAME Gomez, Mich	hael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers 00062322)
4	Date 05/22/2023	 5 Full name of contributor Link, Scott 6 Contributor address; City; State Houston, TX 77055 	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$500).00
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	1	
	Attorney/Me			Managing Attorney		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	spouse (if any)	
			`			
12	If contributor is	s a child, law firm of parent(s) (if ar	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
	05/23/2023	Lopez II, Jose Contributor address; City; Sta Houston, TX 77007	tte; Zip Code		\$500).00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	тпора Сосараноп		Owner		
		employer/law firm		Law firm of contributor's sp	snouse (if any)	
		of Jose R. Lopez II, P.C.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		s a child, law firm of parent(s) (if ar	ny)			
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount of Contribution (\$)	
	06/13/2023	Lowenberg, Mike	out of state 1 AC (ID#	J	\$5,000	0.00
		Contributor address; City; Sta	tte; Zip Code		····	
	Contributor's F	Principal Occupation		Contributor's Job Title	-	
	Attorney			Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	Lowenberg I	Law Firm, PLLC				
	If contributor is	s a child, law firm of parent(s) (if ar	ny)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 20/36 Rpt: 23/76
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	nael Paul (The Honorable)			00062322
4	Date 05/23/2023	5 Full name of contributor McMillan, Chance	out-of-state PAC (ID#	:)	7 Amount of Contribution (\$) \$2,000.0
		6 Contributor address; City;	State; Zip Code		
		houston, TX 77002			
8	Contributor's I Attorney	Principal Occupation		9 Contributor's Job Title Owner	
10	Contributor's of McMillan La	employer/law firm м Firm		11 Law firm of contributor's s	spouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (i	f any)	l	
_	Date	Full name of contributor	out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	06/13/2023	Medina, Francisco	<u>—</u>		\$1,000.0
	Contributor address; City; State; Zip Code				
		Houston, TX 77008			
		Principal Occupation		Contributor's Job Title	
	Attorney			Owner	
	Contributor's 6	employer/law firm		Law firm of contributor's s	spouse (if any)
	If contributor i	s a child, law firm of parent(s) (i	f any)		
_	Date	Full name of contributor	out-of-state PAC (ID#	:)	Amount of Contribution (\$)
	06/22/2023	Molina, Rick			\$250.0
		Contributor address; City;	State; Zip Code		
		Houston, TX 77034			
	Contributor's I	Principal Occupation		Contributor's Job Title	•
	Lawyer			Owner	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Molina Law	Firm			
	If contributor i	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 21/36 Rpt: 24/76
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	hael Paul (The Honorable)			00062322
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	06/30/2023	Monty & Ramirez, L.L.F			\$2,000.00
		6 Contributor address; City;	State; Zip Code		
		Houston, TX 77076			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/12/2023	Muessig, Craig	•		\$250.00
		Contributor address; City;	State; Zip Code		
		Baytown, TX 77521		T =	
	Attorney	Principal Occupation		Contributor's Job Title Owner	
		employer/law firm		Law firm of contributor's s	nouse (if any)
	Self Employ	, ,		Law IIIII of Contributor 5 5	pouse (ii arry)
		s a child, law firm of parent(s) (if any)		
			,		
=	Date	Full name of contributor	out-of-state PAC (ID#:	1	Amount of Contribution (\$)
	05/19/2023	Musslewhite, Jeffrey		/	\$250.00
		Contributor address; City;	State; Zip Code		·· ·
		Houston, TX 77027			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Partner	
		employer/law firm		Law firm of contributor's s	pouse (if any)
	Brown & Mu	sslewhite, LLP			
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CON	ITRIBUTIC	ONS		SCHEDULE /	4(J)1
	The Instru	ction Guide explains how to c	omplete this f	orm.	1	ges Schedule A(J)1 /36 Rpt: 25/76	:
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3 Filer ID 0006232	(Ethics Commission 22	on Filers)
4	Date 06/29/2023	 5 Full name of contributor on Musslewhite, Jeffrey 6 Contributor address; City; State; Z Houston, TX 77027 	ut-of-state PAC (ID#:_ ip Code		7 Amount o	of Contribution (\$)	\$250.00
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	<u>l</u>		
	Attorney	•		Partner			
10		employer/law firm sslewhite, LLP		11 Law firm of contributor's sp	oouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor 0	ut-of-state PAC (ID#:_)	Amount o	of Contribution (\$)	
	06/28/2023	O'Rourke, Sean Contributor address; City; State; Z				,	\$250.00
	Contributor's I	Houston, TX 77002 Principal Occupation		Contributor's Job Title			
	Attorney	-ппсіраї Оссираціон		Partner			
		employer/law firm		Law firm of contributor's sp	ouse (if any)		
		D'Rourke Law Firm			(11),		
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor o	ut-of-state PAC (ID#:_)	Amount o	of Contribution (\$)	
	06/21/2023	Padilla, John Contributor address; City; State; Z Houston, TX 77057	ip Code				\$1,500.00
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Attorney			Partner			
		employer/law firm		Law firm of contributor's sp	oouse (if any)		
		driguez, LLP					
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 23/36 Rpt: 26/76		
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 06/29/2023			7	Amount of Contribution (\$) \$50.00	
		Katy, TX 77449				
8		Principal Occupation		9 Contributor's Job Title		
	Real Estate			Agent		
10	Nextgen Rea	employer/law firm al Estate		11 Law firm of contributor's sp	oous	se (If any)
12		s a child, law firm of parent(s) (if	any)			
H	Date	Full name of contributor	Quit of state BAC (ID#:	,	Т	Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:) 06/29/2023 Perez, Juan Contributor address; City; State; Zip Code				\$250.00	
		Houston, TX 77084				
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Researcher			Clinical Laboratory Scie	entis	st
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
-	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	05/31/2023	Perry, Brent				\$1,000.00
		Contributor address; City; Houston, TX 77010	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Burford Perr	y LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBU	TIC	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete tl	his f	orm.	1	Total pages Schedule A(J)1: Sch: 24/36 Rpt: 27/76
2	FILER NAME Gomez, Mich	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 06/29/2023			7	Amount of Contribution (\$) \$250.00	
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title		
	Lawyer			Owner		
10		employer/law firm ood Prather Law Firm PC		11 Law firm of contributor's sp	ous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		l		
	Date	Full name of contributor out-of-state PAC	(ID#:)		Amount of Contribution (\$)
	06/22/2023	Quan, Gordon Contributor address; City; State; Zip Code Houston, TX 77056				\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Managing Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Quan, Burde	ette & Perez				
	If contributor is	s a child, law firm of parent(s) (if any)		,		
	Date	Full name of contributor out-of-state PAC	(ID#:_)		Amount of Contribution (\$)
	06/05/2023	Rapp & Krock, PC Contributor address; City; State; Zip Code Houston, TX 77056				\$250.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 25/36 Rpt: 28/76		
2	FILER NAME	R NAME		3 Filer ID (Ethics Commission Filers)	
	Gomez, Mic	hael Paul (The Honorable)			00062322
4	Date 06/22/2023	5 Full name of contributor Reyes, Rosa	out-of-state PAC (ID#:_)	7 Amount of Contribution (\$) \$100.00
		6 Contributor address; City; Sta	ate; Zip Code		
		Houston, TX 77004			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	1
	Paralegal			Legal Assistant	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Chamberlair	n Hrdlicka			
12	2 If contributor i	s a child, law firm of parent(s) (if a	ny)		
H	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/20/2023	Reynolds, Chris	_		\$2,500.00
		Contributor address; City; Sta	ate; Zip Code		
		Houston, TX 77002			
	Contributor's	Principal Occupation		Contributor's Job Title	1
	Attorney			Partner	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Reynolds Fr	izzell LLP			
	If contributor i	s a child, law firm of parent(s) (if a	ny)		
H	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/22/2023	Robichaux, Ragan			\$100.00
		Contributor address; City; Sta	ate: Zip Code		-
		, , , , , , , , , , , , , , , , , , , ,	, ,		
		Kingwood, TX 77345			
	Contributor's	Principal Occupation		Contributor's Job Title	1
	Attorney			Associate	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Chamberlair	n Hrdlicka			
	If contributor i	s a child, law firm of parent(s) (if a	ny)		
l					

	MONET	ARY POLITICAL CONTRIBU	JTIC	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete	this f	orm.	1	Total pages Schedule A(J)1: Sch: 26/36 Rpt: 29/76
2	FILER NAME Gomez, Mich	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 06/20/2023	Schaffer, Kent 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$250.00	
8	Contributor's F	Houston, TX 77002 Principal Occupation		9 Contributor's Job Title		
-	lawyer			Partner		
10	Contributor's	employer/law firm nnedy Johnson & Mays		11 Law firm of contributor's sp	ous	ee (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PA	C (ID#:_)		Amount of Contribution (\$)
	06/28/2023	Schaffer, Kent Contributor address; City; State; Zip Code Houston, TX 77019				\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title		
	lawyer	Thiopai Occapation		Partner		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Schaffer Ker	nnedy Johnson & Mays				
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PA	C (ID#:_)		Amount of Contribution (\$)
	06/22/2023	Shackelford, Bowen, McKinley, & Norton, Contributor address; City; State; Zip Code Houston, TX 77002	LLP			\$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		l		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1 Total pages Schedule A(J)1: Sch: 27/36 Rpt: 30/76		
2	FILER NAME	ER NAME			3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	hael Paul (The Honorable)			00062322
4	Date	5 Full name of contributor	7 Amount of Contribution (\$)		
	06/09/2023	Sheehy Ware Pappas &			\$250.00
		6 Contributor address; City; Houston, TX 77010	State; Zip Code		
	Contributor's	Principal Occupation		9 Contributor's Job Title	
ð	Contributors	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/23/2023	Shelby, Timothy			\$2,500.00
		Contributor address; City;	State; Zip Code		·· <mark>·</mark>
		Spring, TX 77389			
	Contributorio	1		Contributor's Job Title	
	Attorney	Principal Occupation		Partner	
		employer/law firm		Law firm of contributor's s	nouse (if any)
		tsanos & Mensing PLLC			(i. ay)
		s a child, law firm of parent(s) (if any)	<u> </u>	
		, , , , , ,			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/29/2023	Silva, Lena			\$100.00
		Contributor address; City;	State; Zip Code		·· ·
			,		
		Houston, TX 77007			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Associate Trial Attorne	У
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Beck Redde	n LLP			
	If contributor i	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains hov	1 Total pages Schedule A(J)1: Sch: 28/36 Rpt: 31/76		
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	hael Paul (The Honorable)			00062322
4	Date 06/27/2023 5 Full name of contributor out-of-state PAC (ID#:) Sorola-Pohlman, Lenora 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$500.00		
		Houston, TX 77008			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Insurance B	roker		Health Insurance Cons	sultan
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Sorola insur	ance services			
12	! If contributor i	s a child, law firm of parent(s) (if	any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/16/2023	Sorrels, Randall			\$1,000.00
		Contributor address; City; S	tate; Zip Code		···
		Houston, TX 77007			
	Contributor's	I Principal Occupation		Contributor's Job Title	_ L
	Attorney			Owner	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Sorrels Law				
	If contributor i	s a child, law firm of parent(s) (if	any)	1	
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/20/2023	Stam, Charles	<u> </u>		\$500.00
		Contributor address; City; S	tate; Zip Code		
		Houston, TX 77006			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Associate	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Hinojosa La	N			
	If contributor i	s a child, law firm of parent(s) (if a	any)		

	MONET	ARY POLITICAL CO	ONTRIBUTIO	ONS	SCHED	ULE A(J)1
	The Instru	ction Guide explains how t	1 Total pages Schedu Sch: 29/36 Rpt: 33			
2	FILER NAME Gomez, Mich	hael Paul (The Honorable)			3 Filer ID (Ethics Co	mmission Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribut	ion (\$) \$2,500.00		
8	Contributor's F	I		9 Contributor's Job Title		
	Attorney			Jr. Attorney		
10		employer/law firm		11 Law firm of contributor's sp	oouse (if any)	
12		s a child, law firm of parent(s) (if any	<i>(</i>)			
	Date	Full name of contributor	Out-of-state PAC (ID#:	1	Amount of Contribut	ion (\$)
	Date Full name of contributor out-of-state PAC (ID#:) O6/27/2023 Stewart J. Guss & Associates Contributor address; City; State; Zip Code Houston, TX 77070					\$558.94
	Contributor's I	Principal Occupation		Contributor's Job Title	1	
	Contributor 5 i	morpai occupation		Contributor 3 deb Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any	/)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribut	ion (\$)
	06/22/2023	Stokes, James Contributor address; City; State Sugar Land, TX 77478	e; Zip Code			\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Doctor Urological Surgery					
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	Memorial He	erman				
	If contributor is	s a child, law firm of parent(s) (if any	/)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 30/36 Rpt: 33/76		
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 7 05/18/2023 Strong, Pat 6 Contributor address; City; State; Zip Code Houston, TX 77056		7 Amount of Contribution (\$) \$5.00		
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	<u> </u>
	Finance Cor			Founder/Owner	
10	Contributor's e	employer/law firm egies		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if an	у)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/30/2023	Sturm, Charles Contributor address; City; Sta Houston, TX 77002	te; Zip Code		\$2,500.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u>1</u>
	Attorney			Founding Partner	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Sturm Law F	PLLC			
	If contributor is	s a child, law firm of parent(s) (if an	y)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/23/2023	The Ammons Law Firm, LL Contributor address; City; Sta Houston, TX 77006			. \$5,000.00
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if an	у)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 31/36 Rpt: 34/76
2	FILER NAME	ILER NAME			3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	hael Paul (The Honorable)			00062322
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	06/22/2023	The Kruckemeyer Law I	Firm		\$300.00
		6 Contributor address; City;	State; Zip Code		
		Houston, TX 77007			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
12	2 If contributor i	s a child, law firm of parent(s) (i	if any)		
H	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	06/22/2023	Tilton, Michael	out of state 1 Me (IBH.		\$250.00
		Contributor address; City;	State: Zin Code		
		Continuation address, City,	State, Elp Sode		
		Houston, TX 77004			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney	- ппстрат Оссираноп		Owner	
		employer/law firm		Law firm of contributor's s	nouse (if any)
	Tilton & Tilto				(i. ay)
		s a child, law firm of parent(s) (i	if any)		
		o a o ma, iam mm or parom(o) (
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	05/30/2023	Torrence, Travis	_		\$250.00
		Contributor address; City;	State; Zip Code		
		Houston, TX 77018		T - "	
		Principal Occupation		Contributor's Job Title	
	Attorney	omployor/low firm		Managing Counsel	nouse (if any)
	Shell USA, I	employer/law firm nc.		Law firm of contributor's s	pouse (ii ariy)
_		s a child, law firm of parent(s) (i	if any)		
	ii contributor i	s a clina, law iiiii oi parchi(s) (i	ii arry)		
\vdash					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A	\(J)1
	The Instru	The Instruction Guide explains how to complete this form.				al pages Schedule A(J)1: h: 32/36 Rpt: 35/76	
2	FILER NAME				3 File	er ID (Ethics Commissio	n Filers)
	Gomez, Mic	hael Paul (The Honorable)			000	062322	
4	Date				7 Am	ount of Contribution (\$)	¢2 ΕΩΩ ΩΩ
	06/06/2023	6 Contributor address; City;					\$2,500.00
		Continuor address, City,	State, 219 Code				
		Houston, TX 77002					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if	any)	
12	2 If contributor i	s a child, law firm of parent(s) (if any)				
_	Date	Full name of contributor	Out of state BAC (ID#	. ,	ΙΔm	ount of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#:) 06/22/2023 Vuong, David		'"	ount of Continuation (¢)	\$100.00		
		Contributor address; City;	State; Zip Code				
		Houston, TX 77082					
		Principal Occupation		Contributor's Job Title			
	Lawyer			Owner			
		employer/law firm		Law firm of contributor's s	spouse (if	any)	
		g & Associates					
	If contributor i	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor	out-of-state PAC (ID#	:)	Am	ount of Contribution (\$)	
	06/22/2023	Walle, Armando					\$500.00
		Contributor address; City;	State; Zip Code				
	0	Houston, TX 77039		T 0 17 1 1 1 7 1			
	Attorney	Principal Occupation		Contributor's Job Title Lawyer			
_		employer/law firm		Law firm of contributor's s	enouse (if	anv)	
	Self employe			Law iiiii or contributor o c	pouce (ii	u.,y)	
		s a child, law firm of parent(s) (if any)				
1							

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 33/36 Rpt: 36/76
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 06/22/2023			7	Amount of Contribution (\$) \$2,500.00	
		Houston, TX 77002				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10	Contributor's e Tracey Fox	employer/law firm & Walters		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/16/2023 Ware, Jackson, Lee, O'Neill, Smith & Barrow LLP Contributor address; City; State; Zip Code Houston, TX 77019				•	\$1,000.00
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
		inisipai occupation				
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/22/2023 Wiedemer, James Contributor address; City; State; Zip Code Houston, TX 77098		•	\$250.00		
	Contributor's F	Principal Occupation		Contributor's Job Title	_	
	Attorney			Owner		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Self					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 34/36 Rpt: 37/76
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 06/14/2023	5 Full name of contributor Wotring, Earnest6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Bellaire, TX 77401				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Partner		
10	Baker Wotrir	employer/law firm ng LLP	11 Law firm of contributor's sp	oous	e (If any)	
12		s a child, law firm of parent(s) (i	f any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/31/2023 Yetter Coleman LLP Contributor address; City; State; Zip Code					\$1,000.00
		Houston, TX 77002				
Contributor's Principal Occupation Contributor's 3						
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/05/2023 Zarghouni, Matthew Contributor address; City; State; Zip Code					\$500.00
	Contributor's I	Houston, TX 77027 Principal Occupation		Contributor's Job Title		
	Attorney	-ппсіраї Оссираціон		Owner		
-		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Zar Law Firn					
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 35/36 Rpt: 38/76
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 06/29/2023	5 Full name of contributor Zehl, Ryan6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		Houston, TX 77024				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Lawyer			Owner		
10	Contributor's e	employer/law firm ciates		11 Law firm of contributor's sp	oous	se (If any)
12	! If contributor is	s a child, law firm of parent(s) (i	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/18/2023 Zimmerman, Alvin Contributor address; City; State; Zip Code					\$100.00
_	Houston, TX 77056 Contributor's Principal Occupation Contributor's Job Title					
	Attorney of Counsel					
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Spencer Far	ne LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	O6/22/2023 Zwernemann, Allen Contributor address; City; State; Zip Code Houston, TX 77009					\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	The second secon		Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	The Zwerne	mann Law Firm				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	SCHEDULE A(J)1							
	The Instru	The Instruction Guide explains how to complete this form. 1 Total particular Sch: 3							
2	FILER NAME			3 Filer I	D (Ethics Commission Filers)				
	Gomez, Micl	hael Paul (The Honorable)		0006	2322				
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Αποι	int of Contribution (\$)				
	06/30/2023	delPozo, Ephraim			\$150.00				
	6 Contributor address; City; State; Zip Code								
		Houston, TX 77002	T						
8		Principal Occupation	9 Contributor's Job Title						
_	Attorney		Partner						
10		employer/law firm	11 Law firm of contributor's sp	ouse (if a	ny)				
	Porter Hedg	es s a child, law firm of parent(s) (if any)							

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 40/76 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gomez, Michael Paul (The Honorable) 00062322 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/23/2023 Stewart J. Guss & Associates \$558.94 Food, beverage, and 7 Contributor address; City; State; Zip Code event expense Houston, TX 77070 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	Tatal name C	
1	Total pages Schedule F1: Sch: 1/16 Rpt: 41/76	2 FILER NAME Gomez, Michael Paul (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062322
4	Date	5 Payee name
	05/25/2023	Campaign Warriors
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,750.00	14237 E. Sam Houston Parkway N.
		Suite 200
		Houston, TX 77044
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign consulting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/30/2023	Chase Credit Card (M)
	Amount (\$)	Payee address; City; State; Zip Code
	\$352.73	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card payment of Sch F4 expenditure (6/27
		Pappas BBQ)
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/05/2023	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$40.00	P.O. Box 15123
	,	
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Credit Card payment of Sch F4 expenditure (1/29
		Houston LGBTQ+)
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	•	ials Expense Printing	Expens Wages	e /Contract Labor		District ut of District (enter a category not listed above)
1	Total pages Schedule F1:					3 Filer ID	
	Sch: 2/16 Rpt: 42/76	Gomez, Michael Paul (Th	ne Honorable)			00062	·322
4	Date	Payee name					
	04/05/2023	Chase Credit Card (SWP	•				
6	Amount (\$)	Payee address; City; P.O. Box 15123	State; Zip C	ode			
	\$435.65	P.O. BOX 15125					
		Wilmington, DE 19850-51	123				
8	PURPOSE	a) Category (See Categories listed a	at the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Credit Card Payment			-		as. Complete Schedule T.
					—		ler living expense f Sch F4 expenditure (1/31
					Pappas)	.,	()
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office so	ught		Off	fice held
	Date	Payee name	A				
	04/05/2023	Chase Credit Card (SWP	-	1 -			
	Amount (\$) \$394.03	Payee address; City; P.O. Box 15123	State; Zip C	oae			
	ψ394.03	F.O. BOX 13123					
		Wilmington, DE 19850-51	123				
	PURPOSE OF	a) Category (See Categories listed a	at the top of this schedule)	(b)	Description		
	EXPENDITURE	Credit Card Payment			=		as. Complete Schedule T. Ier living expense
					ш		f Sch F4 expenditure (2/1
					Treebeard's)		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office so	ught		Off	fice held
	Data	Davies name					
	Date 04/05/2023	Payee name Chase Credit Card (SWP))				
	Amount (\$)	Payee address; City;	State; Zip C	ode			
	\$337.09	P.O. Box 15123	State, Zip C	ouc			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
		Wilmington, DE 19850-51	123	_			
	PURPOSE OF	a) Category (See Categories listed a	at the top of this schedule)	(b)	Description		
	EXPENDITURE	Credit Card Payment					as. Complete Schedule T. Ier living expense
							f Sch F4 expenditure (1/27 El
					Tiempo)		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office so	ught		Off	fice held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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	I Committee Legal Services Salaries/Wages/Contract Labor 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)
	Sch: 3/16 Rpt: 43/76	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	04/05/2023	Chase Credit Card (SWP)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$672.47	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card payment of Sch F4 expenditure (2/28 El
		Tiempo)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	04/05/2023	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$56.27	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card payment of Sch F4 expenditure (2/28 El
		Tiempo [add-on])
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/05/2023	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$321.18	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Credit Card payment of Sch F4 expenditure (2/24 Pappas BBQ)
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Ev Accounting/Banking Fer Consulting Expense For Contributions/ Ontations Made By - Gif

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor 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)
	Sch: 4/16 Rpt: 44/76	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	04/05/2023	Chase Credit Card (SWP)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$68.20	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card payment of Sch F4 expenditure (2/23
		Irma's)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	04/05/2023	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$58.04	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card payment of Sch F4 expenditure (1/25
		Irma's)
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	David and the second se
	Date 04/05/2023	Payee name Chase Cradit Cord (SWD)
		Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$73.75	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card payment of Sch F4 expenditure (3/3
		Frank's Pizza)
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide			pense ages/	e 'Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	
1	Total pages Schedule F1:								Filer ID	(Ethics Commission Filers)
	Sch: 5/16 Rpt: 45/76		ichael Paul (The Ho	norable)					00062322	
4	Date	5 Payee name								
Ļ	04/05/2023		edit Card (SWP)							
6	Amount (\$)	7 Payee addre P.O. Box 1	•	State;	Zip Co	de				
	\$3,328.99	P.O. BOX I	.0123							
		Wilmingtor	ı, DE 19850-5123							
8	PURPOSE OF		See Categories listed at the to	op of this sch	edule)	(b)	Description			
	EXPENDITURE	Credit Car	d Payment				=		de of Texas. Com officeholder living	plete Schedule T. g expense
							Credit Card p	ayr	ment of Sch	F4 expenditure (3/27
							Houston Bar	Ass	sociation)	
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	C	Office sou	ght			Office he	eld
	Date	Payee name								
	04/05/2023	Chase Cre	edit Card (SWP)							
	Amount (\$)	Payee addre	ess; City;	State;	Zip Co	de				
	\$47.97	P.O. Box 1	.5123							
		Wilmingtor	n, DE 19850-5123							
	PURPOSE OF		See Categories listed at the to	op of this sche	edule)	(b)	Description			
	EXPENDITURE	Credit Car	d Payment						de of Texas. Com officeholder living	plete Schedule T. g expense
							 Credit Card p	ayr	ment of Sch	F4 expenditure (1/10
L							Constant Cor	ntac	ct)	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	C	Office sou	ght			Office he	eld
	Date	Payee name	9							
	04/05/2023	Chase Cre	edit Card (SWP)							
	Amount (\$)	Payee addr	ess; City;	State;	Zip Co	de				
	\$47.97	P.O. Box 1	5123							
L		Wilmingtor	n, DE 19850-5123							
	PURPOSE OF		See Categories listed at the to	op of this sche	edule)	(b)	Description			
	EXPENDITURE	Credit Car	d Payment				—		de of Texas. Com officeholder living	plete Schedule T.
							ш		-	F4 expenditure (2/10
							Constant Cor			
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	C	Office sou	ght			Office he	eld
1										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee	Legal Services The Instruction G	Salaries Suide explains how to c	-	s/Contract Labor ete this form.	OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	 E			3	Filer ID	(Ethics Commission Filers)
	Sch: 6/16 Rpt: 46/76	1	chael Paul (The	Honorable)			00062322	
4	Date	5 Payee name	•			-		
	04/05/2023	Chase Cre	dit Card (SWP)					
6	Amount (\$) \$47.97	7 Payee addro P.O. Box 1 Wilmingtor		State; Zip C	ode			
8	PURPOSE	(a) Category (s	Son Catogories listed at	the top of this schedule)	(b)	Description		
•	OF EXPENDITURE	Credit Card		the top of this schedule)		Check if travel out Check if Austin, T	X, officeholder living	
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught		Office h	eld
	Date	Payee name	<u> </u>					
	04/05/2023	l ´	dit Card (SWP)					
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode			
	\$47.97	P.O. Box 1		·				
		Wilmingtor	n, DE 19850-512	23				
	PURPOSE	(a) Category (s	See Categories listed at	the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Credit Car				ш	tside of Texas. Com	
						ш	X, officeholder living	
						Constant Conta		F4 expenditure (4/10
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	uaht		Office h	old
	expenditure to benefit C/Ol		niceriolaer riame	Office 30	rugiit		Office III	Ciu
	Date	Payee name	9					
	05/10/2023	Chase Cre	dit Card (SWP)					
	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode			
	\$232.74	P.O. Box 1	5123					
		Wilmingtor	n, DE 19850-512	23				
	PURPOSE	(a) Category (s	See Categories listed at	the top of this schedule)	(b)	Description		
	OF EXPENDITURE	Credit Car	d Payment				tside of Texas. Com	
						_	X, officeholder living	F4 expenditure (4/6
						River Oaks Flo		1 7 CAPCHUILUIG (4/0
\vdash	Complete ONLY if direct	Candidate/Of	ficeholder name	Office so	ught		Office h	eld
	expenditure to benefit C/O	Н			-			

SCHEDULE F1

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Cor	nmittee	Legal Services The Instruc	emorials Expens			Expens Wages			Travel in District Travel Out of E OTHER (enter		d above)
1	Total pages Schedule F1:	2	FILER NAME							3	Filer ID	(Ethics Comn	nission Filers)
L	Sch: 7/16 Rpt: 47/76	L	Gomez, Mic	hael Paul	(The Hond	orable)					00062322		
4	Date	5	Payee name										
	05/10/2023		Chase Cred	lit Card (S	WP)								
6	Amount (\$)	7	Payee addres	ss; City		State;	Zip C	ode					
	\$47.97		P.O. Box 15	5123									
			Wilmington,	DE 19850	-5123								
8	PURPOSE	(a)	Category (Se	ee Categories li	sted at the top of	of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Credit Card									mplete Schedule T.	
									Credit Card p		officeholder living		ture (5/10
									Constant Cor			тт + схрепин	uic (JIIU
9	Complete ONLY if direct		Candidate/Offic	ceholder na	me	0:	ffice so	l uaht			Office h	neld	
Ĺ	expenditure to benefit C/OI		- Ididato/Offic					agrit			Jince I		
	Date		Payee name										
	06/30/2023		Chase Cred	lit Card (S	WP)								
	Amount (\$)	_	Payee addres	ss; City	_ 	State;	Zip C	ode					
	\$47.97		P.O. Box 15	5123									
			Wilmington,	DE 19850	-5123								
	PURPOSE	(a)	Category (Se	ee Categories li	sted at the top o	of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Credit Card									mplete Schedule T.	
									Credit Card p		officeholder living		ture (6/10
									Constant Cor			i experiur	(0/10
\vdash	Complete ONLY if direct		Candidate/Offic	ceholder na	me	0	ffice so	<u>l</u> ught			Office h	neld	
	expenditure to benefit C/O							•					
H	Date		Payee name										
	05/10/2023		Chase Cred	lit Card (S	WP)								
	Amount (\$)		Payee addres	•		State:	Zip C	ode					
	\$75.30		P.O. Box 15		•	,	,- 0						
	7:2766			-									
			Wilmington,	DE 19850)-5123								
	PURPOSE OF	(a)	Category (Se		sted at the top o	of this sche	dule)	(b)	Description				
	EXPENDITURE		Credit Card	Payment							de of Texas. Co officeholder livir	mplete Schedule T.	
									Credit Card p				ture (4/24 El
									Tiempo)	,		į · - -·	
	Complete ONLY if direct		Candidate/Offic	ceholder na	me	0	ffice so	ught			Office h	neld	
	expenditure to benefit C/OH												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/\	Vages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commission Filers)
	Sch: 8/16 Rpt: 48/76	l	chael Paul (The Hor	norable)				00062322	,
4	Date	5 Payee name							
	05/10/2023	Chase Cre	dit Card (SWP)						
6	Amount (\$) \$1,664.00	7 Payee addre P.O. Box 1 Wilmington		State; Zip Co	ode				
8	PURPOSE	(a) Category (S	ee Categories listed at the top	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Credit Card		, ,		Check if travel	outsi	de of Texas. Com	olete Schedule T.
	EXPENDITORE					_		officeholder living	
						Houston Bar			F4 expenditure (4/27
9	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ight			Office he	eld
	Date	Payee name							
	05/10/2023	Chase Cre	dit Card (SWP)						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$547.08	P.O. Box 1	5123						
		Wilmington	, DE 19850-5123						
	PURPOSE OF	(a) Category (S	ee Categories listed at the top	p of this schedule)	(b)	Description			
	EXPENDITURE	Credit Card	l Payment			=		de of Texas. Com	
						_		officeholder living	F4 expenditure (4/27
						Mortons)	ayı	ment of Sch	r4 experiulture (4/2/
	Complete ONLY if direct expenditure to benefit C/OF		iceholder name	Office sou	ight			Office he	eld
	Date	Payee name	ı						
	05/10/2023	Chase Cre	dit Card (SWP)						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$500.00	P.O. Box 1	5123						
		Wilmington	, DE 19850-5123						
	PURPOSE OF	l	ee Categories listed at the top	p of this schedule)	(b)	Description			
	EXPENDITURE	Credit Card	l Payment					de of Texas. Com officeholder living	
						_			F4 expenditure (4/27
						Texas Gulf C			1 - Oxperionale (4/2)
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	ıght			Office he	eld
	expenditure to benefit C/OI				J -				
\vdash									
l									

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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	I Committee Legal Services Salaries/Wages/Contract Labor 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)
	Sch: 9/16 Rpt: 49/76	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	05/10/2023	Chase Credit Card (SWP)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card payment of Sch F4 expenditure (4/27
		Harris County Democratic Party)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/10/2023	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card payment of Sch F4 expenditure (4/28
		Vision Forge)
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/30/2023	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$26.06	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Credit Card payment of Sch F4 expenditure (5/16 TADJ)
_	Complete ONLY if direct	,
	Complete ONLY if direct expenditure to benefit C/OH	

SCHEDULE F1

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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Com	mittee		morials Expens			Expens Wages			Travel in District Travel Out of Dis OTHER (enter a		
1	Total pages Schedule F1:	ı								3	Filer ID	(Ethics Commission F	ilers)
L	Sch: 10/16 Rpt: 50/76		Gomez, Mic	hael Paul	(The Hond	orable)					00062322		
4	Date	5	Payee name										
	06/30/2023	'	Chase Cred	it Card (S\	WP)								
6	Amount (\$)	7	Payee addres	s; City;		State;	Zip C	ode					
	\$100.00		P.O. Box 15	123									
		'	Wilmington,	DE 19850	-5123								
8	PURPOSE	(a)	Category _{(Se}	e Categories lis	sted at the top o	of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Credit Card						=			plete Schedule T.	
									ш		officeholder living	g expense F4 expenditure (5	/16
									Houston Blac				110
9	Complete ONLY if direct		andidate/Offic	ceholder no	me	Of	ffice so	liabt			Office he		
	expenditure to benefit C/O		andidate/Offic	Jenoluei IId			c 501	ugiil			Onice III		
	Date		Payee name										
	06/30/2023		Chase Cred	it Card (S\	WP)								
	Amount (\$)		Payee addres	s; City;		State;	Zip C	ode					
	\$521.49		P.O. Box 15	123									
		'	Wilmington,	DE 19850	-5123								
	PURPOSE	(a)	Category (Se	e Categories lis	sted at the top o	of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Credit Card						=			plete Schedule T.	
	-								—		officeholder living ment of Sch	g expense F4 expenditure (5,	/18 FI
									Tiempo)	uyi	HOLLE OF SOLL	1 + Oxperioliture (5)	, ±0 LI
\vdash	Complete ONLY if direct	<u> </u>	andidate/Offic	ceholder na	me	Ot	ffice so	<u>l</u> ught			Office he	eld	
	expenditure to benefit C/O				-	3.		- g			200 11		
-	Date		Payee name										
	06/30/2023	ı	Chase Cred	it Card (S\	WP)								
	Amount (\$)		Payee addres			State:	Zip C	ode					
	\$285.24	ı	Payee addres P.O. Box 15			Jiaie,	Zip Ci	Jue					
	Ψ203.24			120									
		,	Wilmington,	DE 19850	-5123					_			
	PURPOSE		Category (Se		sted at the top o	of this sche	dule)	(b)	Description				
	OF EXPENDITURE	'	Credit Card	Payment								plete Schedule T.	
									_		officeholder living ment of Sch	F4 expenditure (5	/19
									Treebeards)		2 0. 0011		. ==
	Complete ONLY if direct		andidate/Offic	ceholder na	me	Of	ffice so	ught			Office he	eld	
	expenditure to benefit C/O												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mad 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		mmittee	Legal Services	·		/ages	/Contract Labor		OTHER (enter a	a category not listed a	above)
		_		The Instruction C		now to co	mpie	ete tnis form.	_			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 11/16 Rpt: 51/76		Gomez, Mic	chael Paul (The	e Honorable)					00062322		
4	Date	5	Payee name									
	06/30/2023		Chase Cred	lit Card (SWP)								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$75.00		P.O. Box 15	5123								
			Wilmington	DE 19850-512	23							
8	PURPOSE	(a)					(h)	Description				
ľ	OF	(۳)	Credit Card	ee Categories listed at	the top of this sche	edule)	(5)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Credit Card	ayment				=		officeholder livin		
								Credit Card p	ayı	ment of Sch	n F4 expenditu	re (5/23 HC
								Democratic L	.aw	yers Assoc	iation)	
9	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office h	ield	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	06/30/2023		Chase Cred	lit Card (SWP)								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$327.40		P.O. Box 15	5123								
			Wilmington,	DE 19850-512	23							
	PURPOSE	(a)	Category (Se	ee Categories listed at	the top of this sch	edule)	(b)	Description				
	OF EXPENDITURE		Credit Card	Payment				=			nplete Schedule T.	
								ш		officeholder livin	n F4 expenditu	ro (6/2
								Kinsta)	ayı	nent of Sci	11 4 experianta	16 (0/2
_	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	aht			Office h	neld	
	expenditure to benefit C/OI		Janaiaate/Oili	ceriolaei riairie		Jinee 30a	giit			Office II	icia	
-	Data	Т										
	Date 06/30/2023		Payee name	lit Card (SWP)								
						7: 0						
	Amount (\$)		Payee addres		State;	Zip Co	ae					
	\$312.98		P.O. Box 15	5123								
			Wilmington,	DE 19850-512	23							
	PURPOSE OF	(a)		ee Categories listed at	the top of this sche	edule)	(b)	Description				
	EXPENDITURE		Credit Card	Payment						de of Texas. Cor officeholder livin	nplete Schedule T.	
											n F4 expenditu	re (6/18
								Southwest Ai			тт - схрепаца	10 (0/10
	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name		Office sou	aht			Office h	ield	
	expenditure to benefit C/OI			23		55 50u	a			0.1100 11		
l												

SCHEDULE F1

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 co	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 12/16 Rpt: 52/76	Gomez, Michael Paul (The Honorable)		00062322
4	Date	5 Payee name		<u> </u>
	06/30/2023	Chase Credit Card (SWP)		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$1,000.00	P.O. Box 15123		
		Wilmington, DE 19850-5123		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Credit Card Payment		Check if travel outside of Texas. Complete Schedule T.
	ZA ZADITORZ			Check if Austin, TX, officeholder living expense
				Credit Card payment of Sch F4 expenditure (6/22 Harris County Democratic Party)
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
9	expenditure to benefit C/OI		gni	Office field
	Date	Dayon nama		
	06/30/2023	Payee name Chase Credit Card (SWP)		
			do	
	Amount (\$) \$260.00	Payee address; City; State; Zip Co P.O. Box 15123	ue	
	\$200.00	P.O. BOX 15123		
		M(I - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
		Wilmington, DE 19850-5123		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Credit Card Payment		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Credit Card payment of Sch F4 expenditure (6/30
				Houston Bar Association)
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	06/30/2023	Chase Credit Card (SWP)		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$185.09	P.O. Box 15123		
		Wilmington, DE 19850-5123		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Credit Card Payment		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	·		Check if Austin, TX, officeholder living expense
				Credit Card payment of Sch F4 expenditure (5/5 Candente)
	Commission ONU Wife allows	Condidate/Officeholder provide	aule t	,
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ynt	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica 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		nmittee	Legal Services			Wages	s/Contract Labor		OTHER (ente		ry not listed above)
				The Instruction	Guide explain	s how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethi	cs Commission Filers)
	Sch: 13/16 Rpt: 53/76		Gomez, Mic	hael Paul (Th	e Honorable	e)				00062322	2	
4	Date	5	Payee name									
	04/05/2023		Chase Cred	it Card (SWP)							
6	Amount (\$)	7	Payee addres	s; City;	Stat	te; Zip Co	ode					
	\$540.92		P.O. Box 15	123								
			Wilmington,	DE 19850-51	.23							
8	PURPOSE	⊢		e Categories listed a		chodulo)	(b)	Description				
	OF		Credit Card		at the top of this s	criedule)	()	Check if travel	outsi	de of Texas. C	omplete So	chedule T.
	EXPENDITURE		Orount Gara	. ayıncın				Check if Austin	, TX,	officeholder liv	ing expens	se
								•	ayı	ment of So	ch F4 e	xpenditure (4/4 El
								Tiempo)				
9	Complete ONLY if direct		andidate/Offic	ceholder name		Office sou	ight			Office	held	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/15/2023		GreenGo202	25								
	Amount (\$)		Payee addres	ss; City;	Stat	te; Zip Co	ode					
	\$550.00		118 Dresder	า								
			Houston, TX	77012								
	PURPOSE	(a)	Category (Se	e Categories listed a	at the ton of this s	chedule)	(b)	Description				
	OF		Advertising I		at the top of this s	cricuaic)	` `	Check if travel	outsi	de of Texas. C	omplete So	chedule T.
	EXPENDITURE		J	'				Check if Austin	, TX,	officeholder liv	ing expens	se
								Campaign sig	gn r	emoval a	nd stora	age
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	ceholder name		Office sou	ıght			Office	held	
	experialitare to beliefit C/Oi											
	Date	ı	Payee name									
	01/13/2023		La Palapa									
	Amount (\$)		Payee addres	ss; City;	Stat	te; Zip Co	ode					
	\$34.20		1110 Presto	n St								
			Houston, TX	77002								
	PURPOSE	(a)	Category (Se	e Categories listed a	at the top of this s	chedule)	(b)	Description				
	OF EXPENDITURE			age Expense		·		Check if travel				
	LAFENDITORE							Check if Austin				
								Breakfast for	jur	ors [pd to	D Thon	nas]
							Ļ					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	ceholder name		Office sou	ıght			Office	neld	
	Original Color Color Color	•										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
┰	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	-
-	Sch: 14/16 Rpt: 54/76	Gomez, Michael Paul (The Honorable) Gomez, Michael Paul (The Honorable)	
4	Date	5 Payee name	
	05/30/2023	RallyPay	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$279.20	2626 Cole Avenue Suite	
		#300	
		Dallas, TX 75204	
		Dallas, 17 73204	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
	_/\\ _!\\\	Check if Austin, TX, officeholder living expense	
		Fee for online	
		contributions (May)	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	06/30/2023	RallyPay	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,158.00	2626 Cole Avenue Suite	
	Φ2,130.00		
		#300	
		Dallas, TX 75204	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Fee for online	
		contributions (June)	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	_
	06/07/2023	Shipley's Donuts	
	Amount (\$)		
	\$33.06	15135 Old Humble Rd	
		Humble, TX 77396	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
		Check if Austin, TX, officeholder living expense	
		Donuts for judges [pd to D Thomas]	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	Н	

SCHEDULE F1

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	e this form.
1	Total pages Schedule F1: Sch: 15/16 Rpt: 55/76	2 FILER NAME Gomez, Michael Paul (The Honorable)	3 Filer ID (Ethics Commission Filers) 00062322
4	Date 04/30/2023	5 Payee name St. Patrick Catholic Church	
6	Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 4918 Cochran Street	
8	PURPOSE OF EXPENDITURE	Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Church festival sponsorship
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/01/2023	Payee name Strong Strategies, LLC	
	Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising and Compliance Services
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 06/01/2023	Payee name Strong Strategies, LLC	
	Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 325 W. 18th St.	
		Houston, TX 77008	
	PURPOSE OF EXPENDITURE	Consulting Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fundraising and Compliance Services
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

ement Solicitation/Fundraising Expense
Dense 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.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 16/16 Rpt: 56/76	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
l	06/22/2023	Strong Strategies, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$2,727.60	325 W. 18th St.
l		
l		Houston, TX 77008
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
l		Check if Austin, TX, officeholder living expense Fundraising and event expense
l		T diffusing and event expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
l	01/29/2023	Walmart
┝	Amount (\$)	Payee address; City; State; Zip Code
l	\$29.94	9235 N Sam Houston Pkwy
l	,	,
l		Humble, TX 77396
⊢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
l		Coffee for jurors [pd to D Thomas]
L	One and the ONE Wife disease	Our distance (Office health as a second seco
l	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
⊨		
l	Date	Payee name
L	04/19/2023	Walmart
l	Amount (\$)	Payee address; City; State; Zip Code
l	\$134.69	9235 N Sam Houston Pkwy
l		U
L		Humble, TX 77396
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Food/Reverage Expense Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Coffee, sugar, cream and related items for jurors [po
l		to D Thomas]
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/18 Rpt: 57/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/05/2023 Candente Amount (\$) Payee address; City; State; Zip Code \$185.09 4306 Yoakum Blvd Houston, TX 77006 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch with staff 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/10/2023 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$47.97 Resevoir Place 1601 Trapelo Road Waltham, MA 02451 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Monthly fee for online email marketing tool Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/18 Rpt: 58/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/10/2023 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$47.97 Resevoir Place 1601 Trapelo Road Waltham, MA 02451 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Monthly fee for online email marketing tool 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/10/2023 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$47.97 Resevoir Place 1601 Trapelo Road Waltham, MA 02451 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Monthly fee for online email marketing tool Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/18 Rpt: 59/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/10/2023 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$47.97 Resevoir Place 1601 Trapelo Road Waltham, MA 02451 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Monthly fee for online email marketing tool 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/10/2023 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$47.97 Resevoir Place 1601 Trapelo Road Waltham, MA 02451 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Monthly fee for online email marketing tool Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/18 Rpt: 60/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/10/2023 **Constant Contact** Amount (\$) Payee address; City; State; Zip Code \$47.97 Resevoir Place 1601 Trapelo Road Waltham, MA 02451 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Monthly fee for online email marketing tool 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/27/2023 El Tiempo Amount (\$) Payee address; City; State; Zip Code \$337.09 2814 Navigation Blvd. Houston, TX 77003 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/18 Rpt: 61/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/28/2023 El Tiempo Amount (\$) Payee address; City; State; Zip Code \$672.47 2814 Navigation Blvd. Houston, TX 77003 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/28/2023 El Tiempo Payee address: Amount (\$) City; State; Zip Code \$56.27 2814 Navigation Blvd. Houston, TX 77003 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors (add-on to order) Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/18 Rpt: 62/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/04/2023 El Tiempo Amount (\$) Payee address; City; State; Zip Code \$540.92 2814 Navigation Blvd. Houston, TX 77003 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/24/2023 El Tiempo Amount (\$) Payee address; City; State; Zip Code \$75.30 2814 Navigation Blvd. Houston, TX 77003 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for staff Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/18 Rpt: 63/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/18/2023 El Tiempo Amount (\$) Payee address; City; State; Zip Code \$521.49 2814 Navigation Blvd. Houston, TX 77003 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/03/2023 Franks Pizza Amount (\$) Payee address; City; State; Zip Code \$73.75 417 Travis Houston, TX 77002 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/18 Rpt: 64/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/23/2023 Harris County Democratic Lawyers Association Amount (\$) Payee address; City; State; Zip Code \$75.00 3401 Allen Parkway, Suite 100 Houston, TX 77019 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership dues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Harris County Democratic Party 04/27/2023 Amount (\$) Payee address; City; State; Zip Code \$500.00 4619 Lyons Avenue Houston, TX 77020 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Event sponsor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Gomez, Michael Paul (The Honorable) Sch: 9/18 Rpt: 65/76 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/22/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$1,000.00 3401 Allen Parkway, Suite 100 Houston, TX 77019 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship of HCDP pride parade float 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/27/2023 **Houston Bar Association** Amount (\$) Payee address; City; State; Zip Code \$3,328.99 1001 Fannin Street #1300 Houston, TX 77002 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsor for Houston Bar Association Annual Dinner Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/18 Rpt: 66/76 Gomez, Michael Paul (The Honorable) 00062322 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 04/27/2023 Houston Bar Association Amount (\$) Payee address; City; State; Zip Code 1001 Fannin Street #1300 \$1,664.00 Houston, TX 77002 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship for Houston Bar Association Annual Dinner 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/30/2023 **Houston Bar Association** Amount (\$) Payee address; City; State; Zip Code \$260.00 1001 Fannin Street #1300 Houston, TX 77002 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsorship of Houston Bar Association LGBTQ+ committee Pride mixer Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/18 Rpt: 67/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 05/16/2023 Houston Black American Democrats Amount (\$) Payee address; City; State; Zip Code \$100.00 P.O. Box 2252 Houston, TX 77252 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership Dues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/29/2023 Houston LGBTQ+ Political Caucus Amount (\$) Payee address; State; Zip Code \$40.00 1915 Commonwealth Suite 104 Houston, TX 77006 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 12/18 Rpt: 68/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/23/2023 Irma's Southwest Grill Amount (\$) Payee address; City; State; Zip Code \$68.20 1314 Texas Houston, TX 77002 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for staff 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/25/2023 Irma's Southwest Grill Amount (\$) Payee address; City; State; Zip Code \$58.04 1314 Texas Houston, TX 77002 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for staff Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 13/18 Rpt: 69/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/02/2023 Kinsta Amount (\$) Payee address; City; State; Zip Code \$327.40 8605 Santa Monica Blvd #92581 West Hollywood, CA 90069 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Annual website hosting 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/27/2023 Morton's Amount (\$) Payee address; City; State; Zip Code \$547.08 1001 McKinney St Suite A4 Houston, TX 77002 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Birthday lunch for staff Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/18 Rpt: 70/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/31/2023 Pappas BBQ Amount (\$) Payee address: City; State; Zip Code \$435.65 1217 Pierce Houston, TX 77002 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/24/2023 Pappas BBQ Amount (\$) Payee address; City; State; Zip Code \$321.18 1217 Pierce Houston, TX 77002 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 15/18 Rpt: 71/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/27/2023 Pappas BBQ Amount (\$) Payee address: City; State; Zip Code \$352.73 1217 Pierce Houston, TX 77002 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/06/2023 River Oaks Flower House, Inc. Amount (\$) Payee address; City; State; Zip Code \$232.74 5 Greenway Plaza East Houston, TX 77046 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Gift/Awards/Memorials Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Get well flowers for colleague Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 16/18 Rpt: 72/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 06/18/2023 Southwest Airlines Amount (\$) Payee address; State; Zip Code \$312.98 2702 Love Field Dr. Dallas, TX 75235 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF X Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Airfare for travel to Annual Harris County Judicial **Education Conference** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/16/2023 Texas Association of District Judges Amount (\$) Payee address; City; State; Zip Code \$26.06 201 Caroline 10th Floor Houston, TX 77002 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense Membership dues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/18 Rpt: 73/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/27/2023 Texas Gulf Coast Area Labor Federation Amount (\$) Payee address; City; State; Zip Code \$500.00 2506 Sutherland St. Houston, TX 77023 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Sponsor of 2023 Working Families Awards Celebration 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/01/2023 **Treebeards** Amount (\$) Payee address; City; State; Zip Code \$394.03 315 Travis Houston, TX 77002 TYPE OF Non-Political Х Political **EXPENDITURE**

(b) Description

Office sought

Lunch for jurors

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Food/Beverage Expense

Candidate/Officeholder name

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/18 Rpt: 74/76 Gomez, Michael Paul (The Honorable) 00062322 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/19/2023 **Treebeards** Amount (\$) Payee address; City; State; Zip Code \$285.24 315 Travis Houston, TX 77002 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Lunch for jurors 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/28/2023 Vision Forge Marketing Amount (\$) Payee address; State; Zip Code \$3,000.00 7500 Branford Place #1305 Sugarland, TX 77479 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Campaign website redesign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

Assets Purchased with Political Contributions and On Hand As of The Last Day of The Reporting Period SCHEDULE					
The Instruction Guide explains how to complete this form.	1 Total pages Schedule M: Sch: 1/1 Rpt: 75/76				
FILER NAME Gomez, Michael Paul (The Honorable)	3 Filer ID (Ethics Commission Filer 00062322				
Description of Asset Alienware x17 R1					

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 76/76 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Gomez, Michael Paul (The Honorable) 00062322 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest Airlines 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule D Schedule F1 Schedule B(J) Schedule C2 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Gomez, Michael Departure city or name of departure location 07/28/2023 Houston 9 Destination city or name of destination location 07/28/2023 Chicago 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Harris County Judicial Education Conference Commercial Airplane