CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple	ete this form.	1 Filer ID (Ethics Comm 00088039		2 Total pages fil	led: 24
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST Vincent		MI		USE ONLY
NAME					Date Received ELECTRONICA	ALLY FILED
	NICKNAME	LAST Perez		SUFFIX	02/26/2024	
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; APT 649 Londonderry Road	/ SUITE #; CIT	ΓY;	ZIP CODE	Date Hand-delivered or Receipt #	r Date Postmarked
ADDRESS Change of Address	El Paso, TX 79907				Date Processed	,
					Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Jorge		MI		
	NICKNAME	LAST Perez		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO 7950 San Paulo Drive	BOX PLEASE);	AP	T / SUITE #; CITY;	STA	ATE; ZIP CODE
(Residence or Business)	El Paso, TX 79915					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (915) 740-1228	IE NUMBER I	EXTENSION			
8 REPORT TYPE	January 15 July 15	30th day before		Runoff Exceeded modified	15th day after car appointment (offic	ceholder only)
a project				reporting limit	· `	
9 PERIOD COVERED	Month Day Year 01/26/2024	TH	HROUGH	Month Day 02/24/202	Year 24	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		Primary General	ELECTION TYPE Runoff Special	Other	
11 OFFICE	OFFICE HELD (if any) None	·		12 OFFICE SOUGHT State Represent	(if known) ative Place El Pa	so District 77
		GO 1	TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 24

13 C / OH NAME	Perez, Vincent		14 Filer ID (100088039	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures. These expenditures may have been made without to officeholders are required to report this information.	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Association of Realtors TREPAC		
		COMMITTEE ADDRESS		
	SPECIFIC	115 San Jacinto Blvd Ste 200		
		Austin , TX 78701		
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
		TX		
16 CONTRIBUTION	1. TOTAL UNITEM	'^` ZED POLITICAL CONTRIBUTIONS (OTHER THAI	N PLEDGES LOANS	
TOTALS		ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 45,195.00
EXPENDITURE TOTALS		IZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 45,568.00
CONTRIBUTION BALANCE	REPORTING PE			\$ 9,890.15
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 20,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
			/incent Perez	
		Signature of	Candidate or Officehold	der
AFFIX NO	TARY STAMP / SEAL AB	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to co	ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

SUBTOTALS - C/OH

FORM COH **COVER SHEET PG 3**

					3 of 24
	ER NAM	(Ethi	cs Commission Filers)		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	44,595.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	600.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	45,568.00
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 1/4 Rpt: 4/24	
2	FILER NAME Perez, Vince	nt			3	Filer ID (Ethics Commission 00088039	on Filers)
4	Date 02/16/2024	5 Full name of contributor Aguilera, Ralph (Mr.)6 Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code		7	Amount of Contribution (\$)	\$500.00
_	Deinsinal	El Paso, TX 79936	lo.	Faralas (Os a la struction			
8	manager	pation / Job title (See Instructions)	9	Employer (See Instructions outsource connection	<u></u>		
	Date 02/23/2024	Full name of contributor Bernal , Jose Contributor address; City; Sta)		Amount of Contribution (\$)	\$295.00
	Dringing Loggy	El Paso, TX 79907		Employer (See Instructions	_		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 02/08/2024	Full name of contributor Foster, Paul (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$5,000.00
		El Paso, TX 79901					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Franklin Mountain Inves		ents	
	Date 02/15/2024	Full name of contributor Fox, Steve Contributor address; City; Sta El Paso, TX 79922)		Amount of Contribution (\$)	\$1,000.00
	Principal occu car dealer	pation / Job title (See Instructions)		Employer (See Instructions fox auto)		
	Date 02/08/2024	Full name of contributor Hunt, Woody Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Senior Chair	pation / Job title (See Instructions) man		Employer (See Instructions Hunt Companies	5)		

	MONET	ARY POLITICAL C	CONTRIBUTION	N:	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this for	rm	1.	1	Total pages Schedule A1: Sch: 2/4 Rpt: 5/24	
2	FILER NAME Perez, Vince	ent				3	Filer ID (Ethics Commission 00088039	on Filers)
4	Date 02/08/2024	5 Full name of contributor Karlsruher, Eileen (Ms.)6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79932						
8	Principal occu President	pation / Job title (See Instructions) 9		Employer (See Instructions CSA Design Group	s) 		
	Date 02/16/2024	Full name of contributor Lowenfield , Luke Contributor address; City; St					Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79922						
	Principal occur car dealer	pation / Job title (See Instructions)		Employer (See Instructions casa nissan	5)		
	Date 02/14/2024	Full name of contributor Lowenfield, Ronald Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		El Paso, TX 79922						
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Casa Auto Group	5)		
	Date 01/30/2024	Full name of contributor Niland, Robert Contributor address; City; St El Paso, TX 79902	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu corporate ho	pation / Job title (See Instructions ousing)		Employer (See Instructions camelot corporates	5)		
	Date 02/14/2024	Full name of contributor Palacios , Raymond Contributor address; City; St El Paso , TX 79925	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu auto retail	pation / Job title (See Instructions)		Employer (See Instructions bravo auto group	s)		

	MONEI	ARY POLITICAL CONTRIBUTIO	N	5		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 3/4 Rpt: 6/24
2	FILER NAME Perez, Vince	nt			3	Filer ID (Ethics Commission Filers) 00088039
4	Date 02/12/2024	 Full name of contributor)	7	Amount of Contribution (\$) \$100.00
8	Principal occu Travel Agent		9	Employer (See Instructions AAA Texas	;)	
	Date 02/06/2024	Full name of contributor out-of-state PAC (ID#:_ Robinson, J K Contributor address; City; State; Zip Code El Paso, TX 79902				Amount of Contribution (\$) \$1,000.00
	Principal occu Chairman	pation / Job title (See Instructions)		Employer (See Instructions Pizza Properties Inc	()	
	Date 02/23/2024	Full name of contributor out-of-state PAC (ID#:_Rodriguez, Eduardo (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$1,000.00
	Principal occu President	El Paso, TX 79911 pation / Job title (See Instructions)		Employer (See Instructions Strategic Communicatio		Consulting Group
	Date 02/21/2024	Full name of contributor out-of-state PAC (ID#:_ Rodriguez, Laura Contributor address; City; State; Zip Code El Paso, TX 79925)		Amount of Contribution (\$) \$100.00
	Principal occu lobbyist	pation / Job title (See Instructions)		Employer (See Instructions The Raben Group	<u>(</u>	
	Date 02/02/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Houston , TX 77019				Amount of Contribution (\$) \$25,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>	
		-				

	MONET	ARY POLITICAL CO	ONTRIBUTIO	NS	SCH	EDULE A1
	The Instru	ction Guide explains how t	1 Total pages Schedule Sch: 4/4 Rpt: 7/24	e A1:		
2	FILER NAME Perez, Vince				3 Filer ID (Ethics Con 00088039	nmission Filers)
4	Date 02/08/2024	Full name of contributor Texas Association of Realto Contributor address; City; Stat)	7 Amount of Contribution	\$1,000.00
8	Principal occu	Austin , TX 78701 pation / Job title (See Instructions)		9 Employer (See Instructions	ls)	
	Date 02/23/2024	Full name of contributor The El Paso County Medica Contributor address; City; Stat			Amount of Contribution	on (\$) \$500.00
	Principal occu	El Paso, TX 79902 pation / Job title (See Instructions)		Employer (See Instructions	s)	

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: 8/24 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Perez, Vincent 00088039 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution **6** Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) description 02/05/2024 Vega, Andrea \$600.00 i shirts 7 Contributor address; City; State; Zip Code El Paso, TX 79912 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 -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	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: 1/16 Rpt: 9/24	Perez, Vincent 00088039
4	Date	5 Payee name
	02/20/2024	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$229.10	366 Summer St.
		Sommerville , MA 02144
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 fundraising fees
		lunuraising lees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Date	Power name
	02/09/2024	Payee name
		Allprint of El Paso
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,512.15	7230-D Gateway E
		El Paso, TX 79915
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Signage
		Signage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Dougo nama
	02/12/2024	Payee name Allprint of El Paso
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,028.35	7230-D Gateway E
		El Paso, TX 79915
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		printed campaign lit
		printed earlpaign it
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/16 Rpt: 10/24	Perez, Vincent 00088039
4	Date	5 Payee name
	02/08/2024	Amazon
6	Amount (\$) \$43.29	7 Payee address; City; State; Zip Code
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense office supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
İ	expenditure to benefit C/O	1
Г	Date	Payee name
	01/26/2024	Carmona , Mario (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,600.00	
		El Paso, TX 79907
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Canvassing/consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/05/2024	Carmona , Mario (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,600.00	
		TV 70007
		TX 79907
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Canvassing/consulting
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ing Expense Event Expense Loan Repayment/Reimbu

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

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

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1: Sch: 3/16 Rpt: 11/24	2 FILER NAME Perez, Vincent		3 Filer ID (Ethics Commission Filers) 00088039
4	Date 02/20/2024	5 Payee name Carmona , Mario (Mr.)		
6	Amount (\$) \$1,600.00	7 Payee address; City; State; Zip Co	ode	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassing/consulting
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
	Date 02/20/2024	Payee name Circle K		
	Amount (\$) \$20.00	Payee address; City; State; Zip Co 1239 N Zaragoza El Paso, TX 79907	ode	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gas for canvesser
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held
	Date 02/06/2024	Payee name City of El Paso Electronic Parking Meter Syste	m	
	Amount (\$) \$1.00	Payee address; City; State; Zip Co	ode	
		El Paso, TX		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense parking meter for event
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gifl/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to o	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 4/16 Rpt: 12/24	Perez, Vincent		00088039
4	Date	5 Payee name		<u> </u>
l	02/05/2024	Crazy Monkey Sticker		
6	Amount (\$)	7 Payee address; City; State; Zip C	Code	
	\$48.71	8800 Gateway Blvd E		
l				
L		El Paso, TX 79907		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l				stickers
l				
9	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/Ol	1		
Г	Date	Payee name		
l	01/30/2024	Druiy, Nicole		
Г	Amount (\$)	Payee address; City; State; Zip C	Code	
l	\$493.00			
l				
		El Paso, TX		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Canvassing
l				g
H	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
l	expenditure to benefit C/O	1		
F	Date	Payee name		
l	02/07/2024	Druiy, Nicole		
H	Amount (\$)	Payee address; City; State; Zip C	Code	
l	\$275.00			
l				
l		El Paso, TX		
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
l				Check if Austin, TX, officeholder living expense Canvassing
				Can adding
-	Complete ONLY if direct	Candidate/Officeholder name Office so	uaht	Office held
	expenditure to benefit C/O		Jt	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/16 Rpt: 13/24	Perez, Vincent 00088039
4	Date	5 Payee name
	02/15/2024	Druiy, Nicole
6	Amount (\$) \$325.00	7 Payee address; City; State; Zip Code
		El Paso, TX
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense canvassing
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/22/2024	Druiy, Nicole
	Amount (\$) \$260.00	Payee address; City; State; Zip Code
		El Paso, TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 02/12/2024	Payee name Druiy, Nicole
	Amount (\$) \$100.00	Payee address; City; State; Zip Code
		El Paso, TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense canvassing
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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: 6/16 Rpt: 14/24	Perez, Vincent 00088039
4	Date	5 Payee name
	01/29/2024	El Paso Mail and Print Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,874.79	1144 Vista de Oro
		El Paso, TX 79935
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		printing & postage expense
		printing a pootage oxpense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	02/08/2024	El Paso Mail and Print Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,000.00	1144 Vista de Oro
		El Paso, TX 79935
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		printing and postage
		printing and poolings
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	02/14/2024	El Paso Mail and Print Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,640.31	1144 Vista de Oro
		ELD TV 7000E
		El Paso, TX 79935
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		printing and postage expense
		Francis and bookings substitute
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
pense Event Expense Loan Repayment/Reimbu

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

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: 7/16 Rpt: 15/24	Perez, Vincent 00088039
4	Date	5 Payee name
	02/21/2024	El Paso Mail and Print Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$649.50	1144 Vista de Oro
		El Paso, TX 79935
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Printing expense
		Tilling expense
Ļ	Commiste ONII V if diseast	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
┕	·	
	Date	Payee name
	02/22/2024	El Paso Mail and Print Service
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,146.94	1144 Vista de Oro
		El Paso, TX 79935
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		printing and postage expense
┡	Operation ONE V if dispert	Occasional Office health and a second of the
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	02/05/2024	Facebook
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.44	1 Hacker Way
		Menlo Park , CA 94025
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
I		Facebook ads
L	Orangleta Chilly iii	Openhidate (Office health and a second secon
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	- Farmana to sonone of or	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1: Sch: 8/16 Rpt: 16/24	2 FILER NAME Perez, Vincent 3 Filer ID (Ethics Commission Filers) 00088039						
4	<u> </u>	5 Payee name GECU						
6	Amount (\$) \$5.00	7 Payee address; City; State; Zip Code						
		El Paso, TX						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense wire fee						
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
	Date 02/14/2024	Payee name Garcia , Monica						
	Amount (\$) \$200.00	Payee address; City; State; Zip Code						
		El Paso, TX 79925						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense stickers						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	Date 02/06/2024	Payee name GoDaddy						
	Amount (\$) \$12.17	Payee address; City; State; Zip Code 2155 E GoDaddy Way						
		Tempe, AZ 85284						
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense domain fee						
	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

	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)				
	Sch: 9/16 Rpt: 17/24	Perez, Vincent	00088039				
4	Date	5 Payee name					
	02/02/2024	IQM Corporation					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$500.00	22 Jericho Turnpike Suite 108					
		Mineola, NY 11501					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) De	escription				
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.				
	LXI ENDITORE		Check if Austin, TX, officeholder living expense				
			igital advertising				
_	Complete ONLY if direct	Condidate/Officeholder name Office cought	Office hold				
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/12/2024	Mark Smith Public Affairs					
Amount (\$) Payee address; City; State; Zip Code \$3,000.00							
		El Paso, TX					
	PURPOSE OF	, ,	escription				
	EXPENDITURE	Salaries/Wages/Contract Labor	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
	fundraising fees						
			•				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O	1					
	Date	Payee name					
	01/31/2024	Office Depot					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$20.09	1111 Geronimo Dr.					
	El Paso, TX 79925						
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.				
	EXPENDITURE		Check if Austin, TX, officeholder living expense				
		of	ffice supplies				
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held				
	experientare to benefit 6/01	•					

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 10/16 Rpt: 18/24	Perez, Vincent 00088039						
4	Date 5 Payee name							
	02/19/2024	Office Depot						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$227.09	1111 Geronimo Dr.						
		El Paso, TX 79925						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
		office supplies						
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/O	-						
	Date	Payee name						
	02/20/2024	Peerly						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$359.82	2232 Dell Range Blvd #287						
		Cheyenne, WY 82009						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Peer-to-Peer texting Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITORE	Check if Austin, TX, officeholder living expense						
		multimedia messaging service (MMS)						
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·						
	Date	Power name						
	01/31/2024	Payee name Prado, Victoria						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$800.00	rayee address, City, State, Zip Code						
	4000.00							
		El Paso, TX 79912						
	PURPOSE	Tu.						
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		voter canvass						
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held						
	Orange to bonom O/O							

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/Political Credit Card Payment	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: 11/16 Rpt: 19/24	Perez, Vincent 00088039
4 Date	5 Payee name
02/23/2024	Prado, Victoria
6 Amount (\$) \$750.00	7 Payee address; City; State; Zip Code El Paso, TX 79912
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense voter canvass
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/23/2024	Prado, Victoria
Amount (\$) \$750.00	Payee address; City; State; Zip Code
	El Paso, TX 79912
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense voter canvass
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date 02/18/2024	Payee name Renegade Public Affairs
Amount (\$)	Payee address; City; State; Zip Code
\$1,393.74	- 1972 - 1112-1125, Stop, Storing - 1970 - 1
	El Paso, TX 79912
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense text messages/voter data
Complete ONLY if direct expenditure to benefit C/OF	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

	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)
	Sch: 12/16 Rpt: 20/24	Perez, Vincent	00088039
4	Date	5 Payee name	•
	02/02/2024	Rodriguez, Adalberto	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$650.00	1438 Jim Larabel	
		El Paso, TX 79936	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ption
	OF EXPENDITURE	, _	ck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		ck if Austin, TX, officeholder living expense
		Canva	assing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	Complete ONLY if direct expenditure to benefit C/Ol		Office field
_	Date		
	Date 02/08/2024	Payee name	
		Rodriguez, Adalberto	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$712.00	1438 Jim Larabel	
		El Paso, TX 79936	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descri	
	EXPENDITURE	Salaries/ Wages/Contract Labor	ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense
		Canva	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	02/13/2024	Rodriguez, Adalberto	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$700.00	1438 Jim Larabel	
		El Paso, TX 79936	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ption
	OF EXPENDITURE	Salaries/Wages/Contract Labor	ck if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE		ck if Austin, TX, officeholder living expense
		canva	issing
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_			
_	Sch: 13/16 Rpt: 21/24	Perez, Vincent 00088039				
4	Date	5 Payee name				
	02/22/2024	Rodriguez, Adalberto				
6	Amount (\$) \$762.12	7 Payee address; City; State; Zip Code 1438 Jim Larabel El Paso, TX 79936				
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense canvassing				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	01/30/2024	SQ*GOKIM DESIGN				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$250.00	3635 Dominy Ln				
		#535				
		Fort Worth, TX 76116				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living evenes				
	Check if Austin, TX, officeholder living expense graphic design					
		graphic design				
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	02/05/2024	SQ*GOKIM DESIGN				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$500.00	3635 Dominy Ln				
		#535				
		Fort Worth, TX 76116				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Salaries/Wages/Contract Labor				
		Check if Austin, TX, officeholder living expense				
		Graphic Design				
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	—			
	expenditure to benefit C/OI					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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	l 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: 14/16 Rpt: 22/24	Perez, Vincent 00088039
4	Date	5 Payee name
	02/06/2024	SQ*GOKIM DESIGN
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$300.00	3635 Dominy Ln
		#535
		Fort Worth, TX 76116
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Graphic Design
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	- CAPCHARLATO TO DOTTOTIC GAOT	
	Date	Payee name
	02/13/2024	SQ*GOKIM DESIGN
	Amount (\$)	Payee address; City; State; Zip Code
	\$325.00	3635 Dominy Ln
		#535
		Fort Worth, TX 76116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	ZA ZADITORZ	Creatin, TX, officeholder living expense
		Graphic Design
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	02/14/2024	SQ*GOKIM DESIGN
	Amount (\$)	Payee address; City; State; Zip Code
	\$425.00	3635 Dominy Ln
	Ψ423.00	
		#535
		Fort Worth, TX 76116
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Graphic Design
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

l	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)					
	Sch: 15/16 Rpt: 23/24	Perez, Vincent	00088039					
4	Date	5 Payee name	·					
l	02/20/2024	Sabor						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
l	\$114.47	10 Henry Trost Ct						
l								
l		El Paso , TX 79901						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description					
l	OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.					
l			Check if Austin, TX, officeholder living expense Campaign meeting					
l			Campaign meaning					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
l	expenditure to benefit C/OI							
F	Date	Payee name						
l	02/11/2024	Walmart						
┝	Amount (\$)	Payee address; City; State; Zip Code						
l	\$269.54	9441 Alameda Ave						
l	,							
		El Paso, TX 79907						
⊢	PURPOSE		Description					
l	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.					
l	EXPENDITURE		Check if Austin, TX, officeholder living expense					
l			office supplies					
L			255					
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held					
┡	·							
l	Date	Payee name						
┡	02/11/2024	Walmart						
l	Amount (\$)	Payee address; City; State; Zip Code						
l	\$28.12	9441 Alameda Ave						
l								
El Paso, TX 79907								
l	PURPOSE OF	,	Description Check if travel outside of Taylor Complete Schoolule T					
l	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
l			office supplies					
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held					
	expenditure to benefit C/OI	1						

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	/ - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services The Instruction Guide ex	Salaries/\	xpense Wages/Contract Labor	Ti	ravel in District ravel Out of Dis THER (enter a	trict category not listed above)
1	Total pages Schedule F1:						iler ID	(Ethics Commission Filers)
	Sch: 16/16 Rpt: 24/24	Perez, Vi	incent			0	0088039	
4	Date	5 Payee nar						
	02/19/2024	corner ba	akery					
6	Amount (\$)	7 Payee add		State; Zip Co	ode			
	\$22.26	1301 Ain	way Blvd					
		El Paso,	TX 79925					
8	PURPOSE	(a) Category	(See Categories listed at the top of	of this schedule)	(b) Description			
	OF EXPENDITURE	Food/Bev	verage Expense				of Texas. Comp ficeholder living	olete Schedule T.
					campaign n			expense
							,	
9	Complete ONLY if direct expenditure to benefit C/Ol		Officeholder name	Office sou	<u>I</u> ught		Office he	eld