CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete	e this form.	1 Filer ID (Ethics Commit 00040542		2 Total pages f	iled: 71
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Ггеу			Date Received ELECTRONIC	ALLY FILED
	NICKNAME L	AST	•••••	SUFFIX	07/15/2024	
	P	Martinez Fisch	ier			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / S	SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
MAILING	104 Babcock Road					т
ADDRESS	Ste. 107				Receipt #	Amount
Change of Address	San Antonio, TX 78201				Date Processed	
					Date Imaged	
					Date inaged	
5 CAMPAIGN	MS / MRS / MR F	IRST		MI		
TREASURER NAME	Dr. J	oe				
	NICKNAME L	 AST		SUFFIX		
		ernal				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PLEASE);	AP	r / SUITE #; CITY	γ; ST	ATE; ZIP CODE
TREASURER ADDRESS	6410 Laurelhill Dr.					
(Residence or Business)	San Antonio, TX 78229-483	5				
	San Amonio, 17, 70229-405.	5				
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	XTENSION			
TREASURER PHONE	(210) 342-2182					
8 REPORT TYPE	January 15	30th day before	election	Runoff		ampaign treasurer
		Oth day bafana			appointment (of	
	X July 15	8th day before e	election	Exceeded modified reporting limit	Final Report (At	lach C/OH-FR)
9 PERIOD	Month Day Year			Month Day		
COVERED	01/01/2024	TH	ROUGH	06/30/20)24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	Pr	rimary	Runoff	Other	
	11/05/2024	ΧG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH		_
	State Representative Distric	t 116		State Represer	ntative District 116	5
	1			ı		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 71

13 C / OH NAME	14 Filer ID (I 00040542	Ethics Comr	mission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures ma	ccepted or political expenditu ay have been made without t ired to report this information	he candidate's or office	holder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRE	SS			
	SPECIFIC					
		COMMITTEE CAMPA	NIGN TREASURER NAME			
		COMMITTEE CAMPA	IIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$	0.00			
	;)	\$	76,442.66			
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS						0.00
	4. TOTAL POLITIC	CAL EXPENDITURES			\$	67,684.03
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE LA	AST DAY OF THE	\$	238,283.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		true	wear, or affirm, under penalty e and correct and includes al der Title 15, Election Code.			
			The Honorab	ole Trey Martinez Fisc	cher	
			Signature of	Candidate or Officeholo	der	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
				, this the		_ day
	, 20, to co	ertify which, witness my	hand and seal of office.			
Signature of offi	cer administering	Printed name of c	officer administering	Title of officer	administerir	ng oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				7 V L I	3 of 71
18 FILER		E ischer, Trey (The Honorable)	19 Filer ID 00040542	(Ethic	es Commission Filers)
		SUBTOTALS SCHEDULE		Š	SUBTOTAL AMOUNT
1. [Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	76,442.66
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		\$			
5.	Χ	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	25,118.96
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. [SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	Χ	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	42,565.07
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 FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CO		SCHEDU	LE A1		
	The Instru	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/10 Rpt: 4/71	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 03/20/2024	5 Full name of contributorAllen, Boone, Humphries, R6 Contributor address; City; State			7	Amount of Contribution (\$)	\$1,000.00
_		Houston, TX 77027	T-		_		
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 04/30/2024	Full name of contributor Ancira Jr., Jesse (Mr.) Contributor address; City; State			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Consultant			self employed			
	Date 05/15/2024	Full name of contributor Anderson, David Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$250.00
		Austin, TX 78731					
	Principal occu Lobbyist	pation / Job title (See Instructions)		Employer (See Instructions HILLCO	s)		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Self	5)		
	Date 01/18/2024	Full name of contributor Atmos Energy Corporation I Contributor address; City; State Dallas, TX 75240		00381954)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL C	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/10 Rpt: 5/71	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 05/01/2024	5 Full name of contributor BNSF RAILPAC6 Contributor address; City; St			7	Amount of Contribution (\$)	\$5,000.00
		Fort Worth Texas, TX 761					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 05/17/2024	Full name of contributor Blackridge Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u>"</u>		
	Timelpai occa	pation / tob the (See Instructions	,	Employer (See Mandenons	-,		
	Date 06/11/2024	Full name of contributor Blocker, Lisa Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$2,000.00
	Dringinal occu	Fort Worth, TX 76107 pation / Job title (See Instructions	1	Employer (See Instructions	-, 		
	Government)	Vistra Energy	٠,		
	Date 04/30/2024	Full name of contributor Brentwood Public Affairs Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/07/2024	Full name of contributor Burkhalter, Sarah Contributor address; City; St Austin, TX 78737	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructionsed)	Employer (See Instructions Not Employed	5)		

	MONET	ARY POLITICAL CONTRIB		SCHEDULE A			
	The Instruc	ction Guide explains how to complete	this forr	m.	1	Total pages Schedule A1: Sch: 3/10 Rpt: 6/71	
2	FILER NAME Martinez Fisc	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 01/28/2024	 Full name of contributor	-)	7	Amount of Contribution (\$)	\$60.00
_		San Antonio, TX 78230			L		
8	Attorney	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 03/01/2024	Full name of contributor out-of-state Price Elizondo, William R. (Dr.) Contributor address; City; State; Zip Code San Antonio, TX 78216	AC (ID#:)		Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions self employed	<u> </u>		
	Date 03/20/2024	Full name of contributor out-of-state Procused Advocacy PAC Contributor address; City; State; Zip Code	AC (ID#:)	•	Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701-2402 pation / Job title (See Instructions)		Employer (See Instructions	<u>''</u>		
	Fillicipal occu	pation / Job title (See instructions)		Employer (See Instructions	·)		
	Date 02/07/2024	Full name of contributor out-of-state P/Friends of the University PAC Contributor address; City; State; Zip Code Austin, TX 78763	-)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> S)		
	Date 05/20/2024	Full name of contributor out-of-state PAHIIICo PAC Contributor address; City; State; Zip Code Austin, TX 78701	AC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CON	S		SCHEDULE A1		
	The Instru	ction Guide explains how to co	mplete this forn	1.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 7/71	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 02/10/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
_	Dringing	Houston, TX 77219	- Io	Franklauser (Co.a. Instructions			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 05/20/2024	Full name of contributor out- Howard, Jay (Mr.) Contributor address; City; State; Zip	of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions)		
	Lobbyist	,		HILLCO	,		
	Date 05/17/2024	Full name of contributor	of-state PAC (ID#: Code			Amount of Contribution (\$)	\$250.00
		Austin, TX 78751					
	Principal occu Lobbyist	pation / Job title (See Instructions)		Employer (See Instructions HILLCO)		
	Date Full name of contributor			Amount of Contribution (\$)	\$4,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/01/2024	Full name of contributor out- Jones, Neal T Buddy (Mr.) Contributor address; City; State; Zip Austin, TX 78746	of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Lobbyist/Ow	pation / Job title (See Instructions) ner		Employer (See Instructions HILLCO)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 5/10 Rpt: 8/71	
2	FILER NAME Martinez Fisc	cher, Trey (The Honorable)				3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 05/20/2024	5 Full name of contributor Mauro, Kyle6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00
_	Deinainal accu	Austin, TX 78703		_	Franks or (Cook batturations			
8	Lobbyist	pation / Job title (See Instruction	5)	9	Employer (See Instructions HILLCO	5)		
	Date 05/20/2024	Full name of contributor McCartt, J Contributor address; City; S)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78703 pation / Job title (See Instruction	s)		Employer (See Instructions	 s)		
	Lobbyist				HILLCO			
	Date 05/21/2024	Full name of contributor Miller , William J. (Mr.) Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78703-2217						
	Principal occu lobbyist	pation / Job title (See Instruction	5)		Employer (See Instructions Hillco Patners	5)		
	Date 02/05/2024	Full name of contributor Moak Casey PAC Contributor address; City; S Austin, TX 78746)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	5)		Employer (See Instructions	5)		
	Date 02/28/2024	Full name of contributor Montez Felder, Debra Contributor address; City; S San Antonio, TX 78253	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$42.00
	Principal occu Not Employe	pation / Job title (See Instructioned	5)		Employer (See Instructions Not Employed	5)		
			,					

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/10 Rpt: 9/71	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 04/30/2024	5 Full name of contributor NuStar PAC6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	San Antonio, TX 78257 pation / Job title (See Instructions	5)	9 Employer (See Instructions	·,		
0	Fillicipal occu	pation / Job title (See Instructions	5)	5 Employer (See instructions	»)		
	Date 03/20/2024	Full name of contributor Phillips 66 PAC Contributor address; City; S	x out-of-state PAC (ID#: C	000513549		Amount of Contribution (\$)	\$1,000.66
		Washington, DC 20004			<u> </u>		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 04/30/2024	Full name of contributor Public Blueprint, LLC Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 04/23/2024	Full name of contributor Rodriguez, Marc A. Contributor address; City; S Austin, TX 78701				Amount of Contribution (\$)	\$2,500.00
	Principal occu Lobbyist	pation / Job title (See Instructions	5)	Employer (See Instructions Offices of Marc A. Rodri		ez	
	Date 02/12/2024	Full name of contributor San Antonio Apartment P Contributor address; City; S San Antonio, TX 78249)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/71		
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)		3	Filer ID (Ethics Commission 00040542	on Filers)	
4	Date 05/20/2024	5 Full name of contributor out-of-state PAC (ID#:_Solis, Eddie 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00	
_	Daine in all a con-	Austin, TX 78717	10 Familiary (0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -				
8	Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions HILLCO)			
	Date 01/25/2024	Full name of contributor out-of-state PAC (ID#:_ TAPTP PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Helotes, TX 78023 pation / Job title (See Instructions)	Employer (See Instructions				
	i illicipai occu	pation / sob title (see instructions)	Employer (See Instructions	,			
	Date 02/07/2024	Full name of contributor out-of-state PAC (ID#:_ TSAPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00	
		Austin, TX 78701-1665					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 02/08/2024	Full name of contributor out-of-state PAC (ID#:_ Texas AFT Cope Fund Contributor address; City; State; Zip Code Austin, TX 78741			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 03/20/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Apartment Association PAC Contributor address; City; State; Zip Code Austin, TX 78701-1951			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/10 Rpt: 11/71		
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)		3	Filer ID (Ethics Commission 00040542	on Filers)	
4	Date 03/20/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch AGC PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00	
_	<u> </u>	Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 05/22/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Association PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Lobby Partners Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
		,		,			
	Date 05/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Manufactured Housing Association, Inc. F Contributor address; City; State; Zip Code Austin, TX 78759	PAC		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/31/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Teachers Association PAC Contributor address; City; State; Zip Code Austin, TX 78759)		Amount of Contribution (\$)	\$3,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
		·					

	MONEI	ARY POLITICAL C	ONTRIBUTIO	DNS		SCHEDUL	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/10 Rpt: 12/71	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 05/20/2024	Full name of contributor Texas Trial Lawyers Asso Contributor address; City; St.)	7	Amount of Contribution (\$)	\$5,000.00
_	Dringing Loon	Austin, TX 78701	<u>, </u>	0 Employer (See Instructions	<u></u>		
8	Рппсіраї осси	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 01/30/2024	Full name of contributor Texas Trial Lawyers Asso Contributor address; City; St)	•	Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 03/20/2024	Full name of contributor Trone, Robert Contributor address; City; St	out-of-state PAC (ID#:_)	-	Amount of Contribution (\$)	\$2,500.00
	Principal occu	Potomac, MD 20854	<u>, </u>	Employer (See Instructions	<u>:)</u>		
	Executive	patient out the (ess metaclicite	,	Total Wine and Spirits	·)		
	Date 05/20/2024	Full name of contributor Vistra Employee PAC Contributor address; City; St	▼ out-of-state PAC (ID#: <u>C</u>	<u>C00226548</u>)		Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>l</u> 5)		
	Date 04/22/2024	Full name of contributor Walker, Nathaniel Contributor address; City; St. Austin, TX 78752	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu Lobbyist	I upation / Job title (See Instructions)	Employer (See Instructions Self	5)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/10 Rpt: 13/71	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)		3	Filer ID (Ethics Commission F	Filers)
4	Date 04/30/2024	Full name of contributor		7	Amount of Contribution (\$)	\$500.00
8	Dringinal occu	Austin, TX 78701 upation / Job title (See Instructions)	9 Employer (See Instructions			
Ů	Lobbyist	pation / Job title (See Instructions)	Self	5)		
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_ WholeSale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1	1,000.00
	Dringing occur	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	5)			
	Date 06/29/2024	Full name of contributor out-of-state PAC (ID#: Williams, Elizabeth Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Alamogordo, NM 88310 upation / Job title (See Instructions)	Employer (See Instructions	e)		
	Not Employe		Not Employed	3)		

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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
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)	_
	Sch: 1/8 Rpt: 14/71	Martinez Fischer, Trey (The Honorable) 00040542	
4	Date	5 Payee name	
	01/04/2024	A1 Storage	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,464.00	1414 Gardina	
		San Antonio, TX 78201	
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 Rent for Campaign Storage	
		Kent for Campaign Storage	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	expenditure to benefit C/O		
_			_
	Date	Payee name	
	06/29/2024	Act Blue	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$232.80	P.O. Box 441146	
		Somerville, MA 02144	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense	
		Check if Austin, TX, officeholder living expense Online fundraising fee	
		Offilite fulfulaising fee	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_	Date		_
	06/28/2024	Payee name Authorize.Net	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$497.49	P.O. Box 8999	
		San Francisco, CA 94128-8999	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Online Fundraising Fee	
_			_
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
			_

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Candidate/Officeholder/Politic Credit Card Payment	al Committee Legal Services Salaries/Wage	es/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to comp	
1 Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
Sch: 2/8 Rpt: 15/71	Martinez Fischer, Trey (The Honorable)	00040542
4 Date	5 Payee name	
02/01/2024	Credit Human	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$106.00	6061 IH-10 West	
	San Antonio, TX 78201	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
OF EXPENDITURE	Accounting/Banking	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Check copy fees
		0" 1 11
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought H	Office held
Date	Payee name	
01/01/2024	Gaudi Holdings LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$750.00	104 Babcock	
	San Antonio, TX 78201	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	Description
EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Rent Campaign Office
		Nem Gampaign Ginee
Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
expenditure to benefit C/O	9	Since held
	1	
Date	Payee name	
02/01/2024	Gaudi Holdings LLC	
Amount (\$)	Payee address; City; State; Zip Code	
\$750.00	104 Babcock	
	San Antonio, TX 78201	
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.
EXPENDITORE		Check if Austin, TX, officeholder living expense
		Rent Campaign Office
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
experiulture to beliefit C/O		
Forms provided by Taxas F	thice Commission was athice state ty us	Version V// 1.0 d378aha(

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		
1	Total pages Schedule F1:		i)
	Sch: 3/8 Rpt: 16/71	Martinez Fischer, Trey (The Honorable) 00040542	
4	Date	5 Payee name	
	03/01/2024	Gaudi Holdings LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$750.00	104 Babcock	
		San Antonio, TX 78201	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	-	Check if Austin, TX, officeholder living expense Rent Campaign Office	
		None Sampaign Smoo	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
	Date	Payee name	
	04/01/2024	Gaudi Holdings LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$750.00	104 Babcock	
		San Antonio, TX 78201	
	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 Rent Campaign Office	
		None Sumpaign Smoo	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	H	
	Date	Payee name	
	05/01/2024	Gaudi Holdings LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$750.00	104 Babcock	
		San Antonio, TX 78201	
	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 Rent Campaign Office	
		The state of the s	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	Н	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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	/ - al Comi		Gift/Award Legal Serv	s/Memorials Ex	xpense	Printing Ex Salaries/W		e /Contract Labor		Travel Out of OTHER (en		strict category not listed above)	
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: 4/8 Rpt: 17/71	ı	Martinez Fis	cher, T	rey (The I	Honorable	!)				0004054	12		
4	Date	5 F	Payee name											
	06/01/2024	(Gaudi Holdi	ngs LL0	C									
6	Amount (\$)	7 F	Payee addres	s; C	City;	State;	; Zip Co	de						
	\$750.00] :	104 Babcoc	k										
		,	San Antonio	, TX 78	3201									
8	PURPOSE	(a) (Category (Se	e Categori	es listed at the	top of this sch	iedule)	(b)	Description					
	OF EXPENDITURE	(Office Overl	nead/Re	ental Expe	ense							plete Schedule T.	
									Check if Austin			living	expense	
									rtent Campai	ıgıı	Office			
_	Complete ONLY if direct		andidata/Offi	obolds	nome		Office corr	abt			Offic	o bo	ald.	
9	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	enolaer	патте	C	Office sou	ynt			Office	e 116	tiu	
L	· 													
	Date	l	Payee name											
	03/21/2024	,	Jefferson Ne	eighbor	hood Ass	ociation								
	Amount (\$)	F	Payee addres	ss; C	City;	State;	; Zip Co	de						
	\$270.00	F	P.O. Box 28	3552										
		,	San Antonio	, TX 78	3228									
	PURPOSE	(a) (Category (Se	e Categori	es listed at the	top of this sch	edule)	(b)	Description					
	OF EXPENDITURE	/	Advertising	Expens	e				=				plete Schedule T.	
									Ad purchase	I, IX,	, omcenoider	living	expense	
									Au purchase					
\vdash	Complete ONLY if direct		andidata/Offi	obolds	nome		Office corr	abt			Offic	o bo	ald.	
	Complete ONLY if direct expenditure to benefit C/OH		andidate/Offic	enoluer	name	(Office sou	yııı			Office	e 116	สน	
<u> </u>														
	Date	l	Payee name											
	05/03/2024	'	Martinez Fis	cher, T	rey (Mr.)									
	Amount (\$)	F	Payee addres	ss; C	City;	State	; Zip Co	de						
	\$518.75	2	2109 W. Mis	stletoe										
		_ (San Antonio	, TX 78	3201									
	PURPOSE	(a) (Category _{(Se}	e Categori	es listed at the	top of this sch	edule)	(b)	Description					
	OF EXPENDITURE	-	Travel Out c	f Distri	ct								plete Schedule T.	
									Check if Austin			-	•	
									State	ııea	ige ior tra	ivel	not reimbursed by the	
_	Compulate ONU V if alice	<u> </u>	andidat - 100	l l - l)#iaa	ء اده د			Ott.	a I-	.la	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	enolaer	патте	C	Office sou	ynt			Office	e ne	eiu	

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
<u> </u>	Tatalana Oliver	
1	Total pages Schedule F1:	
	Sch: 5/8 Rpt: 18/71	Martinez Fischer, Trey (The Honorable) 00040542
4	Date	5 Payee name
	05/03/2024	Martinez Fischer, Trey (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$518.75	2109 W. Mistletoe
		San Antonio, TX 78201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EVDENDITUBE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sept. 2023 mileage for travel not reimbursed by the
		State
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/03/2024	Martinez Fischer, Trey (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$830.00	2109 W. Mistletoe
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Oct. 2023 mileage for travel not reimbursed by the State
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
\vdash	<u> </u>	
	Date	Payee name
	05/03/2024	Martinez Fischer, Trey (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$518.75	2109 W. Mistletoe
		San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EM LINDITURE	Check if Austin, TX, officeholder living expense
		Nov. 2023 mileage for travel not reimbursed by the State
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	1

SCHEDULE F1

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

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	al 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: 6/8 Rpt: 19/71	Martinez Fischer, Trey (The Honorable) 00040542
4	Date	5 Payee name
	05/03/2024	Martinez Fischer, Trey (Mr.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$311.25	2109 W. Mistletoe
		San Antonio, TX 78201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Dec. 2023 mileage for travel not reimbursed by the
		State
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	н
	Date	Payee name
	05/29/2024	Texas Democratic Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	1106 Lavaca St., #100
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Onicerioide//Political Committee Convention Sponsorship
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H .
	Date	Payee name
	04/11/2024	Texas Ethics Commission
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 12070
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fine Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fine for late PFS filing
		Fille IOI late PF3 lilling
_	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

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: 7/8 Rpt: 20/71	Martinez Fischer, Trey (The Honorable) 00040542
4	Date	5 Payee name
	01/11/2024	Texas House of Representatives
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$6,819.17	PO Box 2910
		Austin, TX 78768
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for Operating Budget Expenses
		remisered to operating 2 seget 2/periods
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/09/2024	Vale, Kathy (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	343 Springwood Lane
		San Antonio, TX 78216
	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
		Staff supplement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/03/2024	Vale, Kathy (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	343 Springwood Lane
		San Antonio, TX 78216
	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 Staff supplement
		Stan Supplement
	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 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	nmittee I	Gift/Awards/Men ∟egal Services The Instructi		\$		ages	Contract Labor		Travel Out of D OTHER (enter a	istrict a category not lis	sted above)
1	Total pages Schedule F1: Sch: 8/8 Rpt: 21/71	FILER NAME Martinez Fis	cher, Trey	(The Hor	norable)				ı	Filer ID 00040542	(Ethics Cor	nmission Filers)
4	Date 05/03/2024	Payee name Vale, Kathy	(Ms.)						<u> </u>			
6	Amount (\$) \$1,000.00	Payee addres 343 Springw San Antonio	ood Lane	i	State;	Zip Cod	de					
8	PURPOSE OF EXPENDITURE	Category _{(Se} Salaries/Wa			of this sched	ule)		<u> </u>	, TX,	de of Texas. Cor officeholder livin †		т.
9	Complete ONLY if direct expenditure to benefit C/O	andidate/Offic	eholder nan	ne	Off	fice souç	ght			Office h	eld	
	Date 03/24/2024	Payee name Vale, Kathy	(Ms.)									
	Amount (\$) \$32.00	Payee addres 343 Springw San Antonio	ood Lane	i	State;	Zip Coo	de					
	PURPOSE OF EXPENDITURE	Category _{(Sei} Loan Repay				ule)			, TX,	de of Texas. Cor officeholder livin for Snacks	g expense	
	Complete ONLY if direct expenditure to benefit C/O	andidate/Offic	eholder nan	ne	Off	fice souç	ght			Office h	eld	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.	`		,				
1 Total pages Schedule F4:	3 Filer ID (E	3 Filer ID (Ethics Commission Filers)								
Sch: 1/49 Rpt: 22/71	Martinez Fischer, T	rey (The Honorable)		00040542						
4 CREDIT CARD ISSUER		ncial institution n Express	5 TOTAL OF UNITED EXPENDITURES CHARGED TO A C CARD	\$						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer Paid						
	\$153.50	06/01/2024								
7 PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway							
			Mountainview, CA 9	94043						
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description G-Suite Monthly Se	ervice Fee						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder living	expense					
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer Paid						
	\$620.00	01/05/2024								
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	UT Athletics Tickets	5	2100 San Jacinto							
			Austin, TX 78712							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Tickets for Sugar B	owl						
X Political	·									
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		ustin, TX, officeholder living	expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held						
PAYMENT	(a) Amount Charged \$52.92	(b) Date of Charge 05/12/2024	(c) Date(s) Credit Card	d Issuer Paid						
PAYEE	(a) Payee name Wix.com		(b) Payee address; P.O. Box 40190	City,	State,	Zip Code				
	VVIX.COM		San Francisco, CA	94140						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Website domain an	d hosting foos						
X Political	Office Overhead/Rent	,	website domain an	a nosting lees						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if A	ustin, TX, officeholder living	expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete th	is form.						
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers								
Sch: 2/49 Rpt: 23/71	Martinez Fischer, T	rey (The Honorable)	00040542							
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	Paid					
	\$52.92	06/12/2024								
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code			
	Wix.com		P.O. Box 4	10190						
			San Franc	isco, CA 94140						
8 PURPOSE OF	(a) Category		(b) Descripti							
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Website do	omain and host	ing fees					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	r Paid					
	\$12.78	01/13/2024								
PAYEE	(a) Payee name	(b) Payee a	ddress;	City,	State,	Zip Code				
	DropBox		333 Brann	an St.						
			San Francisco, CA 94107							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description							
X Political	Office Overhead/Rent		Cloud Serv	vice Monthly Fe	e					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	<u> </u>	Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	r Paid					
	\$12.78	02/13/2024								
PAYEE	(a) Payee name	l .	(b) Payee a	ddress;	City,	State,	Zip Code			
			333 Brann		•		·			
	DropBox									
			San Franc	isco, CA 94107						
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Cloud Serv	vice Monthly Fe	е					
X Political										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH	<u> </u>									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.											
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	s Commiss	sion Filers)					
Sch: 3/49 Rpt: 24/71	Martinez Fischer, T	rey (The Honorable)	00040542								
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$							
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid								
	\$12.78	03/13/2024									
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code					
	DropBox		333 Brannan St.								
			San Francisco, CA 94107	7							
8 PURPOSE OF	(a) Category	7 11.	(b) Description								
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Cloud Service Monthly Fe	ee							
X Political		Lat Experies									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	nse						
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid							
	\$12.78	05/13/2024									
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code					
	DropBox		333 Brannan St.								
			San Francisco, CA 94107								
PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Cloud Service Monthly Fee								
X Political	Office Overflead/iverfl	tai Experise									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	nse						
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid							
	\$12.78	06/13/2024									
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code					
			333 Brannan St.								
	DropBox										
			San Francisco, CA 94107								
PURPOSE OF	(a) Category		(b) Description								
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	*	Cloud Service Monthly Fee								
X Political											
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	nse						
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held							
expenditure to benefit C/OH											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)				
Sch: 4/49 Rpt: 25/71	Martinez Fischer, T	rey (The Honorable)			00040542						
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid						
	\$20.53	01/18/2024									
7 PAYEE	(a) Payee name	-	(b) Payee a	ddress;	City,	State,	Zip Code				
	Amazon.com		410 Terry								
	(a) Oatawari		Seattle, W.								
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti								
X Political	Office Overhead/Rental Expense										
				Check if Austin, TX,	officeholder living expe	ense					
Complete ONLY if direct Candidate/Officeholder name Office sought			Office held								
expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issue											
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Iss			Credit Card Issuer	Paid							
	\$158.81	04/22/2024									
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code				
	Spectrum		1900 Blue	Crest							
			San Anton	io, TX 78247							
PURPOSE OF	(a) Category	-f.4b-ibb	(b) Descripti								
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Reni		Wifi and C	able Services							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living expe	ense					
Complete ONLY if direct	Candidate/Officeholder		e sought		Office held						
expenditure to benefit C/OH											
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid						
	\$330.61	05/22/2024									
PAYEE	(a) Payee name	l	(b) Payee a	ddress;	City,	State,	Zip Code				
			1900 Blue	Crest							
	Spectrum										
			San Anton	io, TX 78247							
PURPOSE OF (a) Category (b) Descr											
EXPENDITURE	(See Categories listed at the top		Wifi and C	able Services							
X Political	X Political Office Overhead/Rental Expense										
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T			Check if Austin, TX,	officeholder living expe	ense					
			e sought		Office held						
expenditure to benefit C/OH											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commis	sion Filers)				
Sch: 5/49 Rpt: 26/71	Martinez Fischer, T	rey (The Honorable)		00040542						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITATION OF THE CARD	\$						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$158.81	06/22/2024								
7 PAYEE	(a) Payee name Spectrum		(b) Payee address; 1900 Blue Crest	City,	State,	Zip Code				
			San Antonio, TX 78247							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
l <u> </u>	Office Overhead/Rent		Wifi and Cable Services							
X Political	<u> </u>		<u> </u>							
Non-Political	\frac{1}{2} \frac{1}{2}	of Texas. Complete Schedule T.		(, officeholder living exp	ense					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	ar Daid						
FATMENT	\$16.25			si raiu						
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	BT Liberated Syndi	cation	5001 Baum Blvd							
			Pittsburgh, PA 15213							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Podcast License Fee							
X Political	Office Overhead/Rent	iai Expense								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living exp	ense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged \$16.25	(b) Date of Charge 03/01/2024	(c) Date(s) Credit Card Issue	er Paid						
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code				
	DT Liberated Condi	4:	5001 Baum Blvd							
	BT Liberated Syndi	cation								
			Pittsburgh, PA 15213							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description							
l <u> </u>	Office Overhead/Rental Expense		Podcast License Fee							
X Political			<u> </u>							
			_	Office held	ense					
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought				Onice nela						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete	this form.	(,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
Sch: 6/49 Rpt: 27/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$16.25	04/01/2024					
7 PAYEE	(a) Payee name BT Liberated Syndi	cation	(b) Payee 5001 Bai	um Blvd	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descrip	h, PA 15213			
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		1 ` ′	License Fee			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	oense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought			Office held				
expenditure to benefit C/OH							
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issu				Credit Card Issue	r Paid		
	\$52.92	04/12/2024					
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	Wix.com		P.O. Box	40190			
			San Fran	ncisco, CA 94140	1		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
X Political	Office Overhead/Ren		Website	domain and hosti	ing fees		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	oense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$12.78	04/13/2024					
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	DropBox		333 Bran	ınan St.			
	— Бгорвох 						
	(a) Cataman			ncisco, CA 94107			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion ervice Monthly Fe	ıρ		
Office Overhead/Rental Expense				TVICE MOINING FC			
Maria Balliford				Chack if Austin TV	officeholder living exp	noneo	
				Check if Austin, 1X,	Office held	JE1126	
Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH							
	I						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Etl	nics Commiss	sion Filers)			
Sch: 7/49 Rpt: 28/71	Martinez Fischer, T	rey (The Honorable)		00040542					
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD	\$					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid					
	\$88.68	01/16/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code			
	GoDaddy.com		14455 W. Hayden R						
	(-) 0-4		Scottsdale, AZ 85260						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Domain purchase an	nd rangual face					
X Political	X Political New Political			id Teriewai Tees					
(c) denotes date of state of s			stin, TX, officeholder living e	xpense					
Complete ONLY if direct Candidate/Officeholder name Office sought			Office held						
expenditure to benefit C/OH									
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Is			Issuer Paid						
	\$158.81 01/22/2024								
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code			
	Spectrum		1900 Blue Crest						
			San Antonio, TX 782	.47					
PURPOSE OF	(a) Category	-f.th-i	(b) Description						
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Wifi and Cable Servi	ces					
X Political		<u></u>							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aus	stin, TX, officeholder living ex	xpense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid					
	\$158.81	02/22/2024							
PAYEE	(a) Payee name	ı	(b) Payee address;	City,	State,	Zip Code			
			1900 Blue Crest						
	Spectrum								
			San Antonio, TX 782	247					
PURPOSE OF	PURPOSE OF (a) Category								
EXPENDITURE	(See Categories listed at the top	,	Wifi and Cable Servi	ces					
X Political	Office Overhead/Ren	іаі Ехрепое							
Non-Political (c) Check if travel outside of Texas. Complete Schedule			chedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct				Office held					
expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1 Total pages Sch	edule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
Sch: 8/49 Rpt:	29/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER			ncial institution revious	EXPEN	. OF UNITEMIZED NDITURES GED TO A CREDIT	\$		
6 PAYMENT		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$158.81	03/22/2024					
7 PAYEE		(a) Payee name Spectrum		(b) Payee 1900 Blu		City,	State,	Zip Code
					onio, TX 78247			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top	of this schodulo)	(b) Descri	•			
X Political		Office Overhead/Ren		Wifi and	Cable Services			
Non-Politica	al	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct Candidate/Officeholder name Office sought			Office held					
expenditure to ben	efit C/OH							
PAYMENT		(a) Amount Charged \$122.80	(b) Date of Charge 01/01/2024) Credit Card Issuer 024 02/13/2024	r Paid		
PAYEE	PAYEE (a) Payee name (b) Payee address;				address;	City,	State,	Zip Code
		Google		1600 An	nphitheatre Parkw	/ay		
					nview, CA 94043			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Descri G-Suite	ption Monthly Service F	-ee		
X Political			<u></u>					
Non-Politica	al	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> expenditure to ben		Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT		(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
		\$122.80	04/01/2024					
PAYEE		(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Cooglo		1600 Am	nphitheatre Parkw	/ay		
		Google		Mountair	nview, CA 94043			
PURPOSE OF		(a) Category		(b) Descri				
EXPENDITURE		(See Categories listed at the top		G-Suite	Monthly Service F	=ee		
X Political		Office Overhead/Ren	аі ⊏хрепѕе					
Non-Politica	al	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct Candidate/Officeholder name Office sought					Office held			
expenditure to ben								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)
	Sch: 9/49 Rpt: 30/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$144.30	05/01/2024					
7	PAYEE	(a) Payee name Google			phitheatre Parkw	City, <i>r</i> ay	State,	Zip Code
Ļ	DUDDOCE OF	(a) Category		(b) Descrip	view, CA 94043			
8	PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Reni	•	1 ' '	Monthly Service I	=ee		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living e	expense	
9	9 Complete ONLY if direct Candidate/Officeholder name Office sought			Office held				
expenditure to benefit C/OH								
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issue				r Paid			
		\$35.00	02/01/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Authorize.Net		P.O. Box	8999			
L				San Fran	ncisco, CA 94128	8-8999		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip Digital Fu	otion undraising Month	ly Fee		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u>I</u>	Check if Austin, TX,	officeholder living e	expense	
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	—	Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$35.00	03/01/2024					
Г	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Audharia Nat		P.O. Box	8999			
		Authorize.Net						
					ncisco, CA 94128	3-8999		
PURPOSE OF (a) Category (b) Description EXPENDITURE (See Categories listed at the top of this schedule) Digital Fundacising Month				h. ===				
Office Overhead/Rental Expense			ıy ⊢ee					
X Political								
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,		expense		
			e sought		Office held			
\vdash^{ϵ}	expenditure to benefit C/OH							
ĺ								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete thi	s form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 10/49 Rpt: 31/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issue	r Paid		
	\$35.00	04/01/2024					
7 PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code
	Authorize.Net		P.O. Box 8	3999			
			San Franci	sco, CA 94128	-8999		
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Reni	,	Digital Fun	draising Month	ly Fee		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	_	Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	r Paid		
	\$35.00	05/01/2024					
PAYEE	(a) Payee name		(b) Payee ac	ldress;	City,	State,	Zip Code
	Authorize.Net		P.O. Box 8	3999			
			San Franci	sco, CA 94128	-8999		
PURPOSE OF	(a) Category		(b) Description	on			
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Digital Fun	draising Month	ly Fee		
X Political		<u>_</u> /,pooo					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	r Paid		
	\$35.00	06/01/2024					
PAYEE	(a) Payee name	•	(b) Payee ac	ldress;	City,	State,	Zip Code
	Atha.a.ii.a. N.la.t		P.O. Box 8	3999			
	Authorize.Net						
				sco, CA 94128	-8999		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Office Overhead/Ren	,	Digital Fun	draising Month	іу гее		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u></u>	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held							
expenditure to benefit C/OH							
	periodicité to serient electric						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeriolder/Folitica	· ·	ruction Guide explains how	to complete		TIER (enter a categor	y not listeu ai	oove)
1	Total pages Cabadula F4:		Tuction Guide explains now	to complete	tilis ioiiii.	3 Filer ID (Ethi	os Commiso	sion Filors)
	Total pages Schedule F4:		roy (The Henevelle)			· ·	LS CUITITIES	sion File(s)
_	Sch: 11/49 Rpt: 32/71		rey (The Honorable)	T		00040542		
4	CREDIT CARD ISSUER		ncial institution		OF UNITEMIZED NDITURES	\$		
	1000211	see pi	revious	CHAR	GED TO A CREDIT	ľ		
Ļ		() 1	I (1) = 1	CARD	\	<u></u>		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	s) Credit Card Issuer	Paid		
		\$17.28	02/02/2024					
′	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Twitter		1355 Ma	arket Square			
		1 1111101						
_		(-) O-t			ncisco, CA 94103			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri				
		Office Overhead/Rent		Wioriuny	Service Fee			
	X Political							
	Non-Political	(*)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
e	xpenditure to benefit C/OH		T	T				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s	s) Credit Card Issuer	Paid		
		\$17.28	03/02/2024					
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Twitter		1355 Ma	arket Square			
		1 Witter						
		() 0 :			ncisco, CA 94103			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri	Service Fee			
		Office Overhead/Rent		Wioriuny	Service Fee			
	X Political							
	Non-Political	(*/ 🗖	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH	())	[(1) D () (0)	1	\ 0 0	D : 1		
	PAYMENT	(a) Amount Charged		(c) Date(s	s) Credit Card Issuer	Paid		
		\$17.28	04/02/2024					
	BAYEE					-		
	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Twitter		1355 Ma	arket Square			
				_				
	DUDDOCE OF	(a) Catagony		(b) Descri	ncisco, CA 94103			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	` ′	Service Fee			
	X Political	Office Overhead/Rent	tal Expense	Ivioriting	231 VIOC 1 CG			
	=				_			
	Non-Political	1	of Texas. Complete Schedule T.	a courabt	Check if Austin, TX,	Office hold	ense	
<u> </u>	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
L _e	xpenditure to benefit C/OH							
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	Candidate/Officeriolder/Folitica		ruction Guide explains how	to complete th		THEN (enter a categor	y not listed a	bove)
1	Total pages Schedule F4:		<u> </u>			3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 12/49 Rpt: 33/71		rey (The Honorable)			00040542		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
		\$17.28	05/02/2024					
7	PAYEE	(a) Payee name Twitter		(b) Payee ad 1355 Mark		City,	State,	Zip Code
L				San Franc	isco, CA 94103	1		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descripti Monthly Se				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	' -				Office held			
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
		\$52.92	03/12/2024					
	PAYEE (a) Payee name (b) Payee address;				City,	State,	Zip Code	
		Wix.com		P.O. Box 4	10190			
L					isco, CA 94140	<u> </u>		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti		ing foos		
	X Political	Office Overhead/Ren		website do	omain and hosti	ing lees		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$122.80	(b) Date of Charge 02/01/2024	(c) Date(s) (Credit Card Issue	r Paid		
	PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code
		Google		1600 Amp	hitheatre Parkw	<i>l</i> ay		
				Mountainv	iew, CA 94043			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descripti		-ee		
X Political				7 00-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	-##II-I P :			
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Candidate/Officeholder name			o sought		Onice nelu		
I								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Travel in District
Travel Out of District
OTHER (enter a category

	The Insti	ruction Guide explains how	to complete	this form.	(3	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)
Sch: 13/49 Rpt: 34/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$122.80	03/01/2024					
7 PAYEE	(a) Payee name Google		(b) Payee 1600 Am	address; phitheatre Parkw	City, /ay	State,	Zip Code
				view, CA 94043			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	otion Monthly Service F	-ee		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$35.00	(b) Date of Charge 01/01/2024	(c) Date(s) 02/13/20) Credit Card Issuer 24	r Paid		
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Authorize.Net		P.O. Box	8999			
			+	ncisco, CA 94128	-8999		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri	otion undraising Month	ly Fee		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	nense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	e sought	oreax a racain, 174,	Office held		
PAYMENT	(a) Amount Charged \$17.28	(b) Date of Charge 01/02/2024	(c) Date(s) 02/13/20) Credit Card Issuei 24	r Paid		
PAYEE	(a) Payee name Twitter			address; rket Square ncisco, CA 94103	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Monthly	otion Service Fee			
Non-Political	(1)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	Candidate/Officeriolder/Folitica		ruction Guide explains how	to complete this for		TIEN (eliter à catego	ny not listed a	bove)
1	Total pages Schedule F4:		·	•		3 Filer ID (Ethi	ics Commiss	sion Filers)
	Sch: 14/49 Rpt: 35/71		rey (The Honorable)			00040542		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UN EXPENDITUR CHARGED TO CARD	ES	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid		
		\$17.28	06/02/2024					
7	PAYEE	(a) Payee name Twitter		(b) Payee address 1355 Market So		City,	State,	Zip Code
				San Francisco,	CA 94103			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Monthly Service	e Fee			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX,	officeholder living exp	pense	
9	' — ·				Office held			
е	expenditure to benefit C/OH							
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issu \$52.92 01/12/2024			Card Issuer	Paid			
	PAYEE (a) Payee name (b) Payee address;			s;	City,	State,	Zip Code	
		Wix.com		P.O. Box 40190)			
L				San Francisco,	CA 94140			
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Description Website domain	n and hosti	ng fees		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX,	officeholder living exp	pense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held	•	
	PAYMENT	(a) Amount Charged \$52.92	(b) Date of Charge 02/12/2024	(c) Date(s) Credit	Card Issuer	Paid		
	PAYEE	(a) Payee name Wix.com		(b) Payee address P.O. Box 40190)	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		San Francisco, (b) Description Website domain		ng fees		
L	Non-Political	(7)	of Texas. Complete Schedule T.		ck if Austin, TX,	officeholder living exp	pense	
Complete ONLY if direct expenditure to benefit C/OH			name Öffice	e sought		Office held		
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 15/49 Rpt: 36/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
		\$103.90	02/15/2024					
7	PAYEE	(a) Payee name Adobe Systems, Inc.	С	(b) Payee 345 Park		City,	State,	Zip Code
L					e, CA 95110-2704	4		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip	otion Software License	: Fee		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
9	•			Office held				
expenditure to benefit C/OH								
	PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issu) Credit Card Issuer	r Paid		
		\$103.90	03/15/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Adobe Systems, Inc	С	345 Park	Ave.			
L				San Jose	e, CA 95110-2704	4		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
	X Political	Office Overhead/Ren		Graphic	Software License	e Fee		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid		
		\$103.90	04/15/2024					
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Adobe Systems, Inc	•	345 Park	Ave.			
		Adobe Systems, in	C					
L		() 0 :			e, CA 95110-2704	4		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip		. Egg		
See Categories listed at the top of this schedule) Office Overhead/Rental Expense Graphic Software Office Overhead/Rental Expense			Soliwale License	. 1 66				
New Beliffeet					Chock if Avenue Tree	officeholder living	once	
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name Office sought				Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH					Office Helu			
F	,	l						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Candidate/Onicendida	The Inst	truction Guide explains how	-	THEN (enter a category not i	sted above)		
1 Total pages Schedu	e F4: 2 FILER NAME	·	·	3 Filer ID (Ethics Co	mmission Filers)		
Sch: 16/49 Rpt: 3		rey (The Honorable)		00040542	,		
4 CREDIT CARD ISSUER	Name of fina	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$103.90	06/15/2024					
7 PAYEE	(a) Payee name Adobe Systems, In	С	(b) Payee address; 345 Park Ave.	,	ate, Zip Code		
	(a) Catamani		San Jose, CA 95110-2704	4			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Graphic Software License	e Fee			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if d	rect Candidate/Officeholde	r name Offic	e sought	Office held			
expenditure to benefit							
PAYMENT	(a) Amount Charged \$16.25	(b) Date of Charge 05/01/2024	(c) Date(s) Credit Card Issue	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code		
	BT Liberated Synd	ication	5001 Baum Blvd		, р		
			Pittsburgh, PA 15213				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Ren		(b) Description Podcast License Fee				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin. TX.	officeholder living expense			
Complete ONLY if description of the complete o	rect Candidate/Officeholder	·	e sought	Office held			
PAYMENT	(a) Amount Charged \$16.25	(b) Date of Charge 06/01/2024	(c) Date(s) Credit Card Issue	r Paid			
PAYEE	(a) Payee name	•	(b) Payee address; 5001 Baum Blvd	City, St	ate, Zip Code		
	BT Liberated Synd	BT Liberated Syndication					
PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Podcast License Fee				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if description of the complete o		e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	hics Commiss	sion Filers)			
Sch: 17/49 Rpt: 38/71	Martinez Fischer, T	rey (The Honorable)			00040542					
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$					
6 PAYMENT	(a) Amount Charged \$29.82	(b) Date of Charge 01/02/2024	(c) Date(s 02/13/20) Credit Card Issue 124	er Paid					
7 PAYEE	(a) Payee name Hill Country Springs	5	(b) Payee 10019 S Austin .		City,	State,	Zip Code			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descri							
Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX	k, officeholder living e	xpense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held					
expenditure to benefit C/OH	() ()	T (1) = 1 (1)	1 () = (
PAYMENT	(a) Amount Charged \$103.90	(b) Date of Charge 01/15/2024	(c) Date(s) Credit Card Issue	er Paid					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
	Adobe Systems, Inc	С	345 Park	-						
PURPOSE OF	(a) Category		(b) Descri	e, CA 95110-270)4					
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		1 ' '	Software Licens	e Fee					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	(, officeholder living e	xpense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					
PAYMENT	(a) Amount Charged \$266.97	(b) Date of Charge 01/04/2024	(c) Date(s 02/13/20) Credit Card Issue 124	er Paid					
PAYEE	(a) Payee name Ruth Chris		(b) Payee 107 W. 6		City,	State,	Zip Code			
			Austin, T							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe	,	(b) Descri Fundrais	otion ing Dinner						
X Political										
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				Check if Austin, TX	(, officeholder living e	xpense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 18/49 Rpt: 39/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$103.90	05/15/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Adobe Systems, Inc	С	345 Park <i>A</i>		_		
	(-) 0-4			CA 95110-2704	1		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti	on oftware License	Γοο		
X Political	Office Overhead/Rent		Grapilic St	oliware Licerise	ree		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$108.65	01/19/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	USPS		100 W. Ho	uston St., Ste.	100		
				io, TX 78205			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Postage				
X Political	Office Overhead/Rent	tal Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
	\$17.07	01/29/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	_		55 Almade	n Boulevard			
	Zoom						
			San Jose,	CA 95113			
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Descripti				
EXPENDITURE	Office Overhead/Rent		Monthly Se	ervice Fee			
X Political							
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check				officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.	2 (0	,,	,	
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	sion Filers)	
Sch: 19/49 Rpt: 40/71	Martinez Fischer, T	rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$17.07	02/29/2024					
7 PAYEE	(a) Payee name Zoom		(b) Payee address; 55 Almaden Boulevard	City,	State,	Zip Code	
			San Jose, CA 95113 (b) Description				
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)					
EXPENDITURE	Office Overhead/Rent		Monthly Service Fee				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense				
			e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$17.07	03/29/2024					
PAYEE	(a) Payee name	I	(b) Payee address;	City,	State,	Zip Code	
	Zoom		55 Almaden Boulevard	d			
			San Jose, CA 95113				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Monthly Service Fee				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living e	expense		
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$17.07	(b) Date of Charge 04/29/2024	(c) Date(s) Credit Card Is	suer Paid			
PAYEE	(a) Payee name	l	(b) Payee address;	City,	State,	Zip Code	
			55 Almaden Boulevard	d			
	Zoom						
			San Jose, CA 95113				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Monthly Service Fee				
X Political	Julice Overneau/Rem	iai Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living e	expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 20/49 Rpt: 41/71	Martinez Fischer, T	rey (The Honorable)				00040542				
4	CREDIT CARD ISSUER		ncial institution revious	E	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) I	Date(s) C	redit Card Issue	r Paid				
		\$17.07	05/29/2024								
7	PAYEE	(a) Payee name Zoom			Payee ad Almadeı	dress; n Boulevard	City,	State,	Zip Code		
L						CA 95113					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	1 ' '	Description						
l		Office Overhead/Rent	,	Mo	nthly Se	rvice Fee					
	X Political										
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	oense			
			e sou	ght		Office held					
е	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) I	Date(s) C	redit Card Issue	r Paid				
		\$1,000.00	02/06/2024								
	PAYEE	(a) Payee name		(b)	Payee ad	dress;	City,	State,	Zip Code		
		Christian Manuel C	ampaign	380	01 Turtle	creek Dr.					
l				Po	rt Arthur	, TX 77642					
	PURPOSE OF	(a) Category		(b)	Description	on					
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Co	ntributio	n					
	X Political	Candidate/Officeholde									
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	oense			
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sou	ght	-	Office held				
е	xpenditure to benefit C/OH										
Г	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) I	Date(s) C	redit Card Issue	r Paid				
		\$1,500.00	02/06/2024								
一	PAYEE	(a) Payee name	l	(b)	Payee ad	dress;	City,	State,	Zip Code		
l				107	75 Griffir	Street West,	Ste 212				
l		Venton Jones Cam	paign								
l				Da	llas, TX	75215					
Г	PURPOSE OF	(a) Category		(b)	Description	on					
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio	· ·	Co	ntributio	n					
	X Political	Candidate/Officeholde									
	Non-Political (c) Check if travel outside of Texas. Complete Schedule			•		Check if Austin, TX,	officeholder living exp	oense			
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sou	ght		Office held				
е	xpenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	Candidate/Officerolder/Folitica		ruction Guide explains how	•	THEN (effer a category not listed a	bove)		
1	Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics Commiss	sion Filers)		
	Sch: 21/49 Rpt: 42/71		rey (The Honorable)		00040542	,		
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$500.00	02/11/2024					
7	PAYEE	(a) Payee name Northwest Democra	ats	(b) Payee address; P.O. Box 681911	City, State,	Zip Code		
L				San Antonio, TX 78568				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Contributions/Donatio	ns Made By	(b) Description Event Sponsorship				
	X Political	Candidate/Officeholde		<u> </u>				
Ļ	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		, officeholder living expense			
9	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Daid			
	PATIMENT	\$82.19	02/17/2024	(c) Date(s) Credit Card issue	r Palu			
	PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
		HEB		2118 Fredericksburg Rd.				
l				San Antonio, TX 78201				
	PURPOSE OF	(a) Category	of Abic colored (In)	(b) Description				
	EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Expe		Snacks for District Office				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
		\$78.76	01/21/2024					
	PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
l		ПЕР		2118 Fredericksburg Rd.				
		HEB		San Antonio, TX 78201				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	District and Operated Com-			
	X Political	(See Categories listed at the top of this schedule) Food/Beverage Expense		Snacks and Supplies for I	District and Capitol Offic	e		
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living expense			
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 22/49 Rpt: 43/71	Martinez Fischer, T	rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$54.40	02/02/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Picniks Cafe		6901 Blanco Road				
a puppose of	(a) Category		San Antonio, TX 78216 (b) Description				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	staff lunch				
X Political	Food/Beverage Expe	nse	Stati lation				
Non-Political	(7)	of Texas. Complete Schedule T.		officeholder living expense			
9 Complete ONLY if direct	Complete ONLY if direct candidate/Officeholder name Office sought conditure to benefit C/OH			Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Doid			
PATMENT			(c) Date(s) Credit Card Issue	i Palu			
	\$84.15	02/08/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Liberty Bar		1111 South Alamo Street				
			San Antonio, TX 78210				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Food/Beverage Expe		Lunch with Colleague				
X Political							
Non-Political	· · · —	of Texas. Complete Schedule T.		officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$116.92	02/28/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Sixty Vines		2540 University Blvd				
			Houston, TX 77005				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Donor lunch				
X Political	T Journe verage Expe	iioC					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	e sought	Office held				
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)		
Sch: 23/49 Rpt: 44/71	Martinez Fischer, T	rey (The Honorable)			00040542				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$17.07	06/29/2024							
7 PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code		
	Zoom		55 Almade	en Boulevard					
			<u> </u>	CA 95113					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript						
X Political	Office Overhead/Ren		Monthly S	ervice Fee					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e Office sought						
expenditure to benefit C/OH		I	T	-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$1,000.00	02/07/2024							
PAYEE	(a) Payee name		(b) Payee address;			State,	Zip Code		
	Suleman Lalani Ca	mnaign	PO Box 6	514					
	Suleman Lalam Ca	mpaign		E) / 7700E					
PURPOSE OF	(a) Category		Houston, (b) Descript						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Contribution						
X Political	Contributions/Donation Candidate/Officeholde	ons Made By er/Political Committee							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH		I	1						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid				
	\$48.59	02/29/2024							
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
	Valero Corner Store	9	711 N. Ed	Carey Rd					
	Valeto Comer Store	5							
	(-) 0-1			TX 78550					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript	on avel to Political	Event South T	- - - -			
X Political	Travel Out of District	•	i uci iti li	avei io Fullilidi	Event Jouth 1	cvas			
Non-Political				70	·				
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	pense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolider	name Office	Jougni		Office Held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Insti	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)				
	Sch: 24/49 Rpt: 45/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	Paid		
		\$3,100.00	02/21/2024					
7	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Apollo Artistry			Clark St., # 700			
					IL 60610			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Website	otion design and hostir	ng fees		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid		
		\$535.94	02/26/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Southwest Airlines		P.O. Box	36611			
				Dallas, T				
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Travel for Donor, Colleague and Political Meetings				S
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Chack if Austin TX	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Check ii Adstili, 17,	Office held		
е	xpenditure to benefit C/OH			J				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	⁻ Paid		
		\$250.00	03/02/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Jalon McKoo Camp	ooian	7362 Moi	nets Garden			
		Jalen McKee Camp	aigri					
		(a) Oata war			nio, TX 78218			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
	_	Contributions/Donatio		Continual	OH			
Division Delitical				— a	,, ,			
				Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeriolider	name Office	Jought		Office Held		
ř	,							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comm	ission Filers)		
Sch: 25/49 Rpt: 46/71	Martinez Fischer, T	rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid			
	\$1,000.00	03/04/2024					
7 PAYEE	(a) Payee name Ray Lopez Campai	gn	(b) Payee address; 7015 Quiet Ridge Walk	City, State	, Zip Code		
			San Antonio, TX 78250				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Contributions/Donatio		contribution				
X Political	Candidate/Officeholde	er/Political Committee					
Non-Political	\frac{1}{2} \frac{1}{2}	of Texas. Complete Schedule T.					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH	() 4 () 4	L (1) D : (O)	1() 5 : () 6 1; 6 1;	B : 1			
PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 03/04/2024	(c) Date(s) Credit Card Issuer	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code		
	Alma Allen Campai	gn	3717 Cork Drive				
			Houston, TX 77047				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Contribution				
X Political	Contributions/Donation Candidate/Officeholde						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$67.94	(b) Date of Charge 02/21/2024	(c) Date(s) Credit Card Issuer	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State	, Zip Code		
	FFD FV Office		3326 Fredericksburg Rd.				
	FED EX Office						
			San Antonio, TX 78201				
PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	o for community over			
X Political	EXPENDITURE (See Categories listed at the top of this schedule) Event Expense			se for community even	τ		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.										
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Eth	ics Commiss	sion Filers)		
	Sch: 26/49 Rpt: 47/71	Martinez Fischer, T	rey (The Honorable)				00040542				
4	CREDIT CARD ISSUER		ncial institution revious	EX CH	PEND	F UNITEMIZED TURES D TO A CREDIT	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Da	ite(s) C	redit Card Issue	r Paid				
		\$67.06	02/19/2024								
7	PAYEE	(a) Payee name Michael's Stores		1		ldress; .oop 410	City,	State,	Zip Code		
						o, TX 78238					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	` ′	escription						
l		Office Overhead/Rent		Offic	e supp	olies					
	X Political		•								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Check if Austin, TX, officeholder living expense							
			e sough	t		Office held					
е	expenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Da	ate(s) C	Credit Card Issue	r Paid				
		\$682.14	03/01/2024								
	PAYEE	(a) Payee name		(b) Pa	yee ac	ldress;	City,	State,	Zip Code		
		La Barranca		1026	Cinci	nnatti					
l				San	Antoni	io, TX 78201					
Г	PURPOSE OF	(a) Category		(b) Description							
	EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Community Event Expense							
	X Political										
	Non-Political	(*) L	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living ex	pense			
l	Complete ONLY if direct	Candidate/Officeholder	name Office	e sough	t		Office held				
е	expenditure to benefit C/OH		T # . =	1							
	PAYMENT	(a) Amount Charged \$66.89	(b) Date of Charge 03/08/2024	(c) Da	ate(s) C	Credit Card Issue	r Paid				
\vdash	PAYEE	(a) Payee name		(b) Ps	vee ar	ldress;	City,	State,	Zip Code		
l		(a) r ayou name		1 ` ′	-	d Street, Ste.		Otato,	Zip Code		
l		Uber Technologies,	, Inc.	102	Tovvai	a oncor, orc.	S				
l				San	Franci	sco, CA 94105					
┢	PURPOSE OF	(a) Category			escription						
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Tran	sporta	tion to Event D	inner				
	X Political Travel Out of District										
L	Non-Political (c) Check if travel outside of Texas. Complete Schedule					Check if Austin, TX,	officeholder living ex	pense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sough	t		Office held				
4											

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

1. Total pages Schedule F4: 2 SLER NAME Sch: 2749 Rpt. 48/71 Martinez Fischer, Trey (The Honorable) 3 CHEVIT CARD Sch: 2749 Rpt. 48/71 Martinez Fischer, Trey (The Honorable) 5 CHARGEO TO A CREDIT CARD SUSUER Schedule F1 Schedule F1 Susuer Paid SUSUER Schedule F1 Susuer Paid SUSUER Schedule F1 Susuer Paid			The Insti	ruction Guide explains how	to complete this form.					
See PayMent Candidate Complete Com	1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Eth	ics Commiss	sion Filers)		
SSUER See previous Charged CARGED To A CREDIT CARD CARD CARD TO A CREDIT CARD CAR		Sch: 27/49 Rpt: 48/71	Martinez Fischer, T	rey (The Honorable)		00040542				
ST2.52 O3/08/2024	4				EXPENDITURES CHARGED TO A CRED	\$				
PAYEE (a) Payee name	6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	uer Paid				
Pic N Pac Pic N Pac Pic N			\$72.52	03/08/2024						
Payment (a) Category (b) Description Fuel expense for political travel	7	PAYEE				City,	State,	Zip Code		
EXPENDITURE Ciser Caregories listed at the top of this schedule Travel Out of District Complete ONLY if direct Complete ONLY if complete ONLY if direct Complete O					Seguin, TX 78155					
Travel Out of District Travel Out of District Travel outside of Texas. Complete Schedule T. Check if Austin, T.X. officeholder living expense	8	PURPOSE OF								
9 Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged \$811.71 (b) Date of Charge (C) Date(s) Credit Card Issuer Paid \$811.71 (a) Payee name Austin Proper Hotel (b) Payee address; City, State, Zip Code (600 W 2nd Street) Austin, TX 78701 (b) Description Austin hotel expense PURPOSE OF EXPENDITURE Political (c) Check if travel outside of Texas. Complete Schedule) Travel Out of District PAYMENT (a) Amount Charged (b) Date of Charge (b) Description Austin hotel expense (b) Description Austin hotel expense (c) Description Austin hotel expense (d) Description Austin hotel expense (expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (b) Payee address; City, State, Zip Code (c) Date(s) Credit Card Issuer Paid (c) Date(s) Credit Card Issuer Paid (d) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd San Antonio, TX 78201 (b) Description Fuel cost for Political Travel to South Texas Fuel Complete ONLY if direct (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense Complete ONLY if direct (d) Category (See Categories Islaed at the top of this schedule) Travel Out of District (d) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Iving expense		_		of this schedule)	Fuel expense for political	al travel				
PAYMENT (a) Amount Charged \$811.71 (b) Date of Charge 02/26/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name Austin Proper Hotel Austin, TX 78701 PURPOSE OF EXPENDITURE Political Non-Political expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Payee address; City, State, Zip Code 600 W 2nd Street Austin, TX 78701 (b) Description Austin hotel expense (c) Complete QNLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged (b) Date of Charge 02/29/2024 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (c) Date(s) Credit Card Issuer Paid (d) Amount Charged (c) Date(s) Credit Card Issuer Paid (e) Date(s) Credit Card Issuer Paid (f) Date(s) Credit Card Issuer Paid (g) Payee address; City, State, Zip Code 2118 Fredericksburg Rd HEB GAS (a) Category (See Categories Isleed at the top of this schedule) Travel Out of District (g) Political (c) Description Puel cost for Political Travel to South Texas (h) Payee address; City, State, Zip Code 2118 Fredericksburg Rd (h) Description Puel cost for Political Travel to South Texas (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense (h) Description Check if Austin, TX, officeholder living expense		Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
PAYEE (a) Amount Charged \$811.71 (b) Date of Charge 02/26/2024 (c) Date(s) Credit Card Issuer Paid (d) Payee address; City, State, Zip Code 600 W 2nd Street Austin Proper Hotel Austin, TX 78701 (a) Category (See Categories listed at the top of this schedule) Travel Out of District (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name (a) Amount Charged (b) Description Austin, TX, 78701 (b) Description Austin hotel expense (c) Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office Sought Office held PAYMENT (a) Amount Charged \$51.05 (b) Date of Charge 02/29/2024 (c) Date(s) Credit Card Issuer Paid (d) Payee name (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd HEB GAS San Antonio, TX 78201 (b) Description Fuel cost for Political Travel to South Texas Fuel Cost for Political Travel to South Texas Complete QNLY if direct (c) Check if travel outside of Texas. Complete Schedule T. Complete QNLY if direct Candidate/Officeholder name Office Sought Office bold Office held Complete QNLY if direct Candidate/Officeholder name Office Sought Office held	9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
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PAYEE (a) Payee name Austin Proper Hotel (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Payee address; City, State, Zip Code 600 W 2nd Street Austin, TX 78701 (b) Description Austin hotel expense (c) Check if travel outside of Texas. Complete Schedule Travel Out of District (c) Check if travel outside of Texas. Complete Schedule Travel Out of District (c) Check if travel outside of Texas. Complete Schedule Travel Out of District (c) Check if travel outside of Texas. Complete Schedule Travel Outside Office Sought (c) Date(s) Credit Card Issuer Paid (d) Payee address; City, State, Zip Code 2118 Fredericksburg Rd PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd San Antonio, TX 78201 (b) Description Fuel cost for Political Travel to South Texas (c) Check if travel outside of Texas. Complete Schedule Travel Out of District (c) Check if travel outside of Texas. Complete Schedule Travel Out Office Sought Office Sought Office Sought Office Sought Office Hold		PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
Austin Proper Hotel Austin, TX 78701 PURPOSE OF EXPENDITURE			\$811.71	02/26/2024						
Austin, TX 78701 PURPOSE OF EXPENDITURE		PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE			Austin Proper Hotel	I	600 W 2nd Street					
See Categories listed at the top of this schedule Travel Out of District Complete Schedule T. Check if Austin, TX, officeholder living expense					Austin, TX 78701					
Non-Political Complete ONLY if direct expenditure to benefit C/OH			(See Categories listed at the top	of this schedule)						
Complete ONLY if direct expenditure to benefit C/OH PAYMENT (a) Amount Charged \$51.05 (b) Date of Charge 02/29/2024 (c) Date(s) Credit Card Issuer Paid (d) Payee name (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd HEB GAS PURPOSE OF EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District Travel Out of District Complete ONLY if direct Candidate/Officeholder name Office sought Office held (c) Date(s) Credit Card Issuer Paid (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd San Antonio, TX 78201 (b) Description Fuel cost for Political Travel to South Texas Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held		X Political	Traver Out of District							
expenditure to benefit C/OH PAYMENT (a) Amount Charged \$51.05 (b) Date of Charge 02/29/2024 (c) Date(s) Credit Card Issuer Paid (d) Payee name (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd HEB GAS PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (a) Category (See Categories listed at the top of this schedule) Travel Out of District (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct (c) Candidate/Officeholder name Office sought Office held		Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin,	TX, officeholder living ex	pense			
PAYMENT (a) Amount Charged \$51.05 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$51.05 (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd HEB GAS San Antonio, TX 78201 PURPOSE OF EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District [X] Political [Non-Political] Non-Political Complete ONLY if direct (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd (b) Description Fuel cost for Political Travel to South Texas		Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
PAYEE (a) Payee name HEB GAS (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd San Antonio, TX 78201 (b) Description Fuel cost for Political Travel to South Texas Fuel Cost for Political Travel to South Texas Complete ONLY if direct Candidate/Officeholder name Office sought Office held	е	expenditure to benefit C/OH		-						
HEB GAS PURPOSE OF (See Categories listed at the top of this schedule) Travel Out of District Complete ONLY if direct (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Fuel cost for Political Travel to South Texas Check if Austin, TX, officeholder living expense Candidate/Officeholder name Office sought Office held		PAYMENT			(c) Date(s) Credit Card Issi	uer Paid				
HEB GAS San Antonio, TX 78201 PURPOSE OF EXPENDITURE X Political Non-Political Non-Political Complete ONLY if direct Candidate/Officeholder name San Antonio, TX 78201 (b) Description Fuel cost for Political Travel to South Texas Fuel cost for Political Travel to South Texas Check if Austin, TX, officeholder living expense Office sought Office held		PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE X Political					2118 Fredericksburg Ro	b				
PURPOSE OF (See Categories listed at the top of this schedule) Travel Out of District One Check if travel outside of Texas. Complete Schedule T.			HEB GAS							
EXPENDITURE See Categories listed at the top of this schedule)										
Travel Out of District Non-Political Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			` ' ' '	of this schedule)	' '					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct Candidate/Officeholder name Office sought Office held	1		l ' -		Fuel cost for Political Tr	avei to South Te	exas			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		=								
	L				<u> </u>		pense			
	e		Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense
Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************		,		
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics	s Commis	sion Filers)		
	Sch: 28/49 Rpt: 49/71	Martinez Fischer, T	rey (The Honorable)			00040542				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid				
		\$1,000.00	03/04/2024							
7	PAYEE	(a) Payee name Liz Campos Campa	aign	(b) Payee 1028 Rig	gsby	City,	State,	Zip Code		
Ļ		() 0 :			onio , TX 78210					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descri						
		Contributions/Donatio	ns Made By	Contribution						
	X Political	Candidate/Officeholde	er/Political Committee							
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse			
9	9 Complete ONLY if direct Candidate/Officeholder name Offi expenditure to benefit C/OH			e sought		Office held				
F	PAYMENT	(a) Amount Chargod	(b) Date of Charge	(c) Dato(s	Crodit Card Issue	r Daid				
	PATMENT	(a) Amount Charged \$110.22	(b) Date of Charge 03/07/2024	(c) Date(s) Credit Card Issuei	i Paiu				
	PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code		
		Hertz		9559 Air	port Blvd					
				San Anto	onio, TX 78216					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Rental Car for Political Travel to Houston Texas						
	X Political	Traver Out of District								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid				
		\$208.69	03/08/2024							
	PAYEE	(a) Payee name	-	(b) Payee	address;	City,	State,	Zip Code		
		Post Oak Hotel		1600 W	Loop South					
				Houston	, TX 77027					
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Hotel for Political Travel to Houston Texas							
	X Political									
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse			
	Complete ONLY if direct Candidate/Officeholder name Office					Office held				
е	expenditure to benefit C/OH									
l _								·		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 Salaries/Mange/Control Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

Candidate/Officenoider/Politica	-	ruction Guide explains how		THER (enter a category not listed above)			
1 Total pages Schedule F4:		<u> </u>	3 Filer ID (Ethics Commission Filers)	.)			
Sch: 29/49 Rpt: 50/71		rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid	_		
	\$17.99	03/08/2024					
7 PAYEE	(a) Payee name Lyft		(b) Payee address; 185 Berry Street, Suite 50		de		
	() 0 :		San Francisco, CA 94107				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Transportation to meeting				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged \$262.20	(b) Date of Charge 03/13/2024	(c) Date(s) Credit Card Issuel	r Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Coo	de		
	Casa De Palmas H	otel	101 N. Main				
PURPOSE OF	(a) Category		McAllen, TX 78501 (b) Description				
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Hotel expense for Politica	l travel to South Texas			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged \$367.72	(b) Date of Charge 03/16/2024	(c) Date(s) Credit Card Issue	r Paid			
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Cod	de		
	The Sinclair		512 Main Street				
	() 2 .		Fort Worth, TX 76102				
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District		of this schedule)	(b) Description Hotel Expense for Political Travel to Fort Worth				
X Political		L					
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH				Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	ics Commiss	sion Filers)
Sch: 30/49 Rpt: 51/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	DF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$1,000.00	03/04/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Ron Reynolds Cam	npaign		6 South #233			
			 	city, TX 77459			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript				
	Contributions/Donatio		Contribution	on			
X Political	Candidate/Officeholde	er/Political Committee					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
9 Complete ONLY if direct					Office held		
expenditure to benefit C/OH							
PAYMENT (a) Amount Charged (b) Date of Charge			(c) Date(s)	Credit Card Issue	r Paid		
	\$275.16 03/16/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Hertz		9559 Airpo	ort Blvd			
			San Anton	nio, TX 78216			
PURPOSE OF	(a) Category		(b) Descript	ion			
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Rental Car for Political Travel to Fort Worth				
X Political Non-Political	() []			7			
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.					
Complete ONLY if direct expenditure to benefit C/OH			e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
	\$22.67	03/19/2024					
PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code
			1026 Cinc	innatti			
	La Barranca						
			San Antor	io, TX 78201			
PURPOSE OF	(a) Category	of Alvin and a dud a N	(b) Descript				
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper		staff meeti	ing			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	pense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
<u> </u>	· · · · · · · · · · · · · · · · · · ·			. <u></u>			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Candidate/Oniceriolder/Folitica	•	ruction Guide explains how	to complete t		TTIEN (einei a calegi	ory not listed at	oove)
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 31/49 Rpt: 52/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$5,000.00	03/20/2024					
7 PAYEE	(a) Payee name Kristian Carranza C	Campaign	(b) Payee a		City,	State,	Zip Code
			San Antonio, TX 78283				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Contributions/Donatio		Contribution				
X Political	Candidate/Officeholde	er/Political Committee	ittee				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
			e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$75.89	03/20/2024					
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code
	Tlahco Mexican Ca	fe	6702 San	n Pedro			
			San Anto	nio, TX 78216			
PURPOSE OF	(a) Category		(b) Descrip	otion			
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meeting v	with colleague			
X Political	Food/Deverage Exper	1136					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$500.00	03/16/2024					
PAYEE	(a) Payee name	<u> </u>	(b) Payee a	address;	City,	State,	Zip Code
			PO Box 7				·
	Northeast Democra	its					
			San Anto	nio, TX 78270			
PURPOSE OF	(a) Category		(b) Descrip	tion			
EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Event Sp	onsorship			
X Political	Candidate/Officeholde						
Non-Political	Non-Political (c) Check if travel outside of Texas. Complete Schedule T				officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)		
	Sch: 32/49 Rpt: 53/71	Martinez Fischer, T	rey (The Honorable)			00040542				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid				
		\$250.00	03/20/2024							
7	PAYEE	(a) Payee name	`ampaign	(b) Payee 26041 C	address; ypress Oaks	City,	State,	Zip Code		
		Monica Alcantara C	ampaign							
Ļ	DUDDOOT 05	(a) Cataman			onio, TX 78255					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip						
	X Political	Contributions/Donatio		Continua	uon					
	Non-Political	Candidate/Officehold			Chook if Austin TV	office bolder living over				
٦	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	e sought	Crieck ii Austiii, 1A,	officeholder living exp	lense			
	expenditure to benefit C/OH			g						
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid				
		\$100.00	04/21/2024							
	PAYEE	(a) Payee name	<u> </u>	(b) Payee	address;	City,	State,	Zip Code		
		Apollo Artistry		1165 N.	Clark St., # 700					
L				Chicago,	IL 60610					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip						
	X Political	Office Overhead/Rent		website	design and hosti	ng rees				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid				
		\$100.00	05/21/2024							
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code		
		Apollo Artistry		1165 N.	Clark St., # 700					
		7 (polio 7 ti tisti y								
┝	PURPOSE OF	(a) Category		(b) Descri	IL 60610					
	EXPENDITURE	(See Categories listed at the top	of this schedule)	· ′	design and hosti	na fees				
	Office Overhead/Rental Expense		tal Expense	1.000.00						
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			l	Check if Austin, TX.	officeholder living exp	ense			
Н	Complete ONLY if direct					Office held				
e	expenditure to benefit C/OH									
		-								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)		
	Sch: 33/49 Rpt: 54/71	Martinez Fischer, T	rey (The Honorable)			00040542				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	[·] Paid				
		\$100.00	06/21/2024							
7	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
		Apollo Artistry			lark St., # 700					
				Chicago, I						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti						
		Office Overhead/Rent		website de	esign and hostir	ig rees				
	X Political									
	Non-Political	· · -	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	9 Complete ONLY if direct Candidate/Officeholder name Office expenditure to benefit C/OH			e sought		Office held				
e	<u> </u>	(a) Amazunt Chavarad	(h) Data of Chause	(a) Data(a) (Oradit Card Issuer	Daid				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Dale(s) (Credit Card Issuer	Paid				
		\$10.00	03/31/2024							
	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
		Facebook.com	One Hacker Way		er Way					
				Menlo Par	k, CA 94025					
	PURPOSE OF	(a) Category		(b) Descripti	ion					
	EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Digital Ad	Purchase					
	X Political	The vortioning Expenses								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
е	xpenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid				
		\$314.09	04/23/2024							
Г	PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code		
		73.44.5.4.		110 E. 2nd	d St					
		JW Marriott								
L				Austin, TX						
	PURPOSE OF	(a) Category (See Categories listed at the top.	of this schedule)	(b) Descripti						
	EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District			Hotel Lodging Austin						
	X Political									
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
е	xpenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 34/49 Rpt: 55/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid		
		\$37.67	04/23/2024					
7	PAYEE	(a) Payee name Lyft			y Street, Suite 50		State,	Zip Code
L		() 2 :			ncisco, CA 94107			
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri	ption rtation to Commu	nity Event		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9				e sought		Office held		
е	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged \$778.09	(b) Date of Charge 04/24/2024	(c) Date(s)) Credit Card Issuei	r Paid		
	PAYEE (a) Payee name			(b) Payee	address;	City,	State,	Zip Code
		IKEA		1000 IKE	EA-RBFCU Pkwy			
L					c, TX 78223			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descrip	ption yn Office Furniture	е		
	X Political		•					
	Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
е	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid		
		\$100.00	03/21/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Apollo Artistry		1165 N.	Clark St., # 700			
				Chicago,	, IL 60610			
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Poetal Expanse			(b) Descrip Website	ption design and hostir	ng fees		
	X Political Office Overhead/Rental Expense							
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct Candidate/Officeholder name Officeholder name					Office held		
е	xpenditure to benefit C/OH							
l								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Sch: 35/49 Rpt: 56/71	Martinez Fischer, T	rey (The Honorable)		00040542				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$16.99	04/09/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		Lyft		185 Berry Street, Suite 50					
8	PURPOSE OF	(a) Category		San Francisco, CA 94107 (b) Description					
	EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Transportation to Political Meeting					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense				
9 e:	Complete ONLY if direct xpenditure to benefit C/OH	e to benefit C/OH			Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$13.99	04/15/2024						
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		Revolucion Coffee		7959 Broadway					
		() 2		San Antonio, TX 78209					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Meeting with Colleague					
	X Political	Food/Beverage Expe	•	Meeting with Colleague					
	Non-Political		of Texas. Complete Schedule T.						
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	esought	Office held				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid				
		\$82.80	03/22/2024						
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		Bedoy's Bakery		2714 Hillcrest					
		() 0 :		San Antonio, TX 78228					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		•	(b) Description Cake for Community Event						
X Political									
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			dule T. Check if Austin, TX, officeholder living expense					
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete th	is form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)	
Sch: 36/49 Rpt: 57/71	Martinez Fischer, T	rey (The Honorable)			00040542			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid			
	\$222.19	04/21/2024						
7 PAYEE	(a) Payee name		(b) Payee a		City,	State,	Zip Code	
	Bluehost.com		5335 Gate	•				
	(a) Catamani		 	lle, FL 32256				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript		`on/iooc			
X Political	Office Overhead/Rent		Website D	omain Design S	Services			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living e	expense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT (a) Amount Charged (b) Date of Charge			(c) Date(s)	Credit Card Issuer	Paid			
	\$58.50 04/27/2024							
PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code	
	SIXT Car Rental		9559 Airpo	ort Blvd				
			San Anton	nio, TX 78216				
PURPOSE OF	(a) Category		(b) Descript	ion				
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)	Rental Car for Political meetings Fort Worth					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	 	Check if Austin, TX,	officeholder living e	expense		
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held			
expenditure to benefit C/OH			-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	Paid			
	\$227.69	04/28/2024						
PAYEE	(a) Payee name	L	(b) Payee a	ddress;	City,	State,	Zip Code	
			2118 Fred	ericksburg Rd.				
	HEB							
			San Anton	io, TX 78201				
PURPOSE OF	(a) Category		(b) Descript					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	•		erages and Sna	icks for Capit	tol/District/0	Campaign	
X Political	1 oour Develage Expen	1100	Offices					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Г	Check if Austin, TX,	officeholder living e	expense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)		
	Sch: 37/49 Rpt: 58/71	Martinez Fischer, T	rey (The Honorable)			00040542				
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF EXPENDITI CHARGED CARD		\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	edit Card Issuer	Paid				
		\$910.55	03/27/2024							
7	PAYEE	(a) Payee name Rosario's Mexican	Cafe	(b) Payee add	ary's Street	City,	State,	Zip Code		
L		() 2		San Antonio						
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Bexar Demo	ı cratic Delegat	tion Lunch				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense						
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
е	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cre	edit Card Issuer	Paid				
		\$137.82	04/12/2024							
	PAYEE	(a) Payee name		(b) Payee add	ress;	City,	State,	Zip Code		
		Carriqui		239 E. Grays	son					
				San Antonio	, TX 78215					
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Lunch with C						
	X Political	Food/Beverage Expe	rise							
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Check if Austin, TX, officeholder living expense						
	Complete ONLY if direct	Candidate/Officeholder	name Office	sought		Office held				
е	expenditure to benefit C/OH									
	PAYMENT	(a) Amount Charged \$5.33	(b) Date of Charge 04/19/2024	(c) Date(s) Cre	edit Card Issuer	Paid				
	PAYEE	(a) Payee name		(b) Payee add	ress;	City,	State,	Zip Code		
		Commonwealth Co	ffee	118 Davis Ct	t					
		- Commonwealar Co		San Antonio	TY 78200					
\vdash	PURPOSE OF	(a) Category		San Antonio						
	EXPENDITURE	(See Categories listed at the top	•	staff meeting						
	X Political Food/Beverage Expense									
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T				Check if Austin, TX,	officeholder living expe	ense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
⊢		l .								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

		The Inst	ruction Guide explains how	to complete	this form.	(* ** *********************************	,	,
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
	Sch: 38/49 Rpt: 59/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
		\$119.05	03/30/2024					
7	PAYEE	(a) Payee name Best Buy		(b) Payee 6001 NW	address; / Loop 410	City,	State,	Zip Code
L					onio, TX 78238			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
	X Political	Office Overhead/Ren		office sup	oplies			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living exp	ense	
9				e sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid		
		\$519.07	04/09/2024					
	PAYEE	•	(b) Payee	address;	City,	State,	Zip Code	
		Austin Proper Hote	I	600 W 21	nd Street			
				Austin, T	X 78701			
	PURPOSE OF	(a) Category	-f.4b-i	(b) Descrip				
	EXPENDITURE	(See Categories listed at the top Travel Out of District	or this schedule)	Hotel Lo	dging Austin			
	X Political							
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid		
		\$430.92	04/26/2024					
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		The Circlein		512 Mair	Street			
		The Sinclair						
L					th, TX 76102			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip		ort Morth		
1		Travel Out of District	,	Louging	Political Travel Fo	OIL VVOILII		
	X Political							
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living exp	ense	
 						Office held		
\vdash	expenditure to benefit C/OH							
1								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.									
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)				
Sch: 39/49 Rpt: 60/71	Martinez Fischer, T	rey (The Honorable)		00040542						
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$25.00	04/08/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Starbucks		2202 Fredericksberg Rd							
			San Antonio, TX 78201							
8 PURPOSE OF	(a) Category	of this sahadula)	(b) Description							
EXPENDITURE 	(See Categories listed at the top Gift/Awards/Memorial		Staff Gift							
X Political										
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense					
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$409.37	04/17/2024								
PAYEE	(a) Payee name	L	(b) Payee address;	City,	State,	Zip Code				
	Aba		1011 South Congress							
			Austin, TX 78704							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description Capitol & HDC Staff Lunch							
X Political	Food/Beverage Expe	nse								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	T. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid						
	\$367.23	05/06/2024								
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	Hertz		9559 Airport Blvd							
	TIEILZ									
			San Antonio, TX 78216							
PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	r Baltiera Lacarda		0				
X Political	EXPENDITURE (See Categories listed at the top of this schedule) Travel Out of District		Car Rental for Dallas/FW & Colleagues	Political meetin	gs with (Candidates				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	x, officeholder living expe	ense					
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held						
expenditure to benefit C/OH										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instr	ruction Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics	s Commiss	sion Filers)
Sch: 40/49 Rpt: 61/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	Paid		
	\$60.14	05/06/2024					
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Hertz		9559 Airpo				
				io, TX 78216			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti	on Fees for Dallas	Troval		
X Political	Travel Out of District	· · · · · · · · · · · · · · · · · · ·	Toll Road	rees for Dallas	Travei		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid		
	\$100.41	05/01/2024					
PAYEE	(a) Payee name		(b) Payee address; City, State, Zi				Zip Code
	HEB		2118 Fred	ericksburg Rd.			
				io, TX 78201			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Descripti Food & Be	ion everages for Col	mmunity Event		
X Political	Pood/Deverage Exper	1136					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	· [Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issue	Paid		
	\$470.96	05/31/2024					
PAYEE	(a) Payee name	·	(b) Payee a	ddress;	City,	State,	Zip Code
	On the seat Aldinor		P.O. Box	36611			
	Southwest Airlines						
			Dallas, TX	78235			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descripti				
l <u> </u>	Travel Out of District	of this schedule)	Travel for	Texas Democra	tic Convention		
X Political							
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commis	sion Filers)
Sch: 41/49 Rpt: 62/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$15.00	05/24/2024					
7 PAYEE	(a) Payee name River Center Mall F	Parking		ommerce	City,	State,	Zip Code
	(a) Catamani			onio, TX 78205			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descrip Parking f				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin, TX,	officeholder living exp	oense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	_	Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
	\$273.18	05/03/2024					
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	Spirit Airlines		2800 Exe	ecutive Way			
			Hollywoo	d, FL 33025			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion Id Political Conve	ening		
X Political	Travel Out of District						
Non-Political	(c) X Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$48.55	05/06/2024					
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	HEB GAS		2118 Fre	dericksburg Rd			
			San Anto	onio, TX 78201			
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Fuel for F	Rental Vehicle			
X Political	Traver Out of District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	oense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
						<u> </u>	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 42/49 Rpt: 63/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$331.71	05/06/2024					
7 PAYEE	(a) Payee name Westin Hotel		(b) Payee 13340 Da	address; allas Parkway	City,	State,	Zip Code
			Dallas, T	V 75240			
8 PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE X Political	(See Categories listed at the top Travel Out of District	of this schedule)		for Dallas Politica	al and Colleag	ue Meetin	gs
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$1,000.00	05/15/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Jarvis Johnson Car	mpaign	PO Box 1	L6600			
			Houston,	TX 77222			
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE X Political	(See Categories listed at the top Contributions/Donatio		Contribut	ion			
Non-Political		of Texas. Complete Schedule T.		Chack if Austin TV	officeholder living ex	moneo	
Complete ONLY if direct	Candidate/Officeholder	i	e sought	Check ii Austin, 17,	Office held	perise	
expenditure to benefit C/OH			J				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$34.91	05/17/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Lyft		185 Berry	y Street, Suite 50	000		
	Lyft						
DUDDOOF OF	(a) Catagon			cisco, CA 94107			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	tation to Airport			
X Political	Travel Out of District		l				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	Check if Austin TY	officeholder living ex	nense	
Complete ONLY if direct	Candidate/Officeholder	·	e sought	L Check if Additi, 1A,	Office held		
expenditure to benefit C/OH			J				
	I						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Onicendiden/Folitica		ruction Guide explains how		THEN (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME	-		3 Filer ID (Ethics Commission Filers)
Sch: 43/49 Rpt: 64/71		rey (The Honorable)		00040542
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid
	\$416.18	04/25/2024		
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Picnikins Cafe		6901 Blanco Road	
			San Antonio, TX 78216	
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this sahadula)	(b) Description	
EXPENDITURE	Food/Beverage Exper		Luncheon for Bexar Electo	ed Officials
X Political				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held
expenditure to benefit C/OH				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid
	\$13.32	05/07/2024		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Lyft		185 Berry Street, Suite 50	000
			San Francisco, CA 94107	
PURPOSE OF	(a) Category		(b) Description	
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Transportation from Airpo	rt to Convention
X Political	Traver out or Bistrict			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid
	\$174.74	06/15/2024		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	Office Devet		150 N. Crossroads Blvd.	
	Office Depot			
	() 0 :		Balcones Heights, TX 782	201
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top)	of this schedule)	(b) Description Campaign Office Supplies	
X Political	Office Overhead/Rent		Campaign Office Supplies	
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	·	e sought	Office held
expenditure to benefit C/OH				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Insti	ruction Guide explains how	to complete th	is form.	(,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 44/49 Rpt: 65/71		rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$236.46	06/24/2024					
7 PAYEE	(a) Payee name Amazon.com		(b) Payee at		City,	State,	Zip Code
			Seattle, W.				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descripti				
<u></u>	Event Expense	or this scriedule)	Supplies to	or Campaign Ev	ent/		
X Political	·						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$487.13	05/30/2024					
PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
	CCR Studios		9501 Argyl	le Dr			
			Austin, TX	78749			
PURPOSE OF	(a) Category		(b) Descripti	on			
EXPENDITURE	(See Categories listed at the top Advertising Expense	of this schedule)	Video Prod	duction TDP Co	nvention		
X Political	Advertising Expense						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issue	r Paid		
	\$77.97	06/26/2024					
PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code
			9559 Airpo	ort Blvd			
	Hertz						
			San Anton	io, TX 78216			
PURPOSE OF	(a) Category	(d: 1 11)	(b) Descripti				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Toll Charge	es and Fees			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
	•						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comn	nission Filers)
Sch: 45/49 Rpt: 66/71	Martinez Fischer, T	rey (The Honorable)		00040542	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	\$333.93	05/05/2024			
7 PAYEE	(a) Payee name		(b) Payee address; 209 N. Stanton	City, State	e, Zip Code
	Stanton House		209 N. Stanton		
			El Paso , TX 79901		
8 PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top	of this schedule)	Lodging for TDP Conventi	ion	
X Political	Travel Out of District				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	\$67.35	05/06/2024			
PAYEE	(a) Payee name		(b) Payee address;	City, State	e, Zip Code
	Hertz		9559 Airport Blvd		
			San Antonio, TX 78216		
PURPOSE OF	(a) Category		(b) Description		
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Toll Road Fees		
X Political	Traver Out of District				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held	
expenditure to benefit C/OH					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid	
	\$265.57	05/15/2024			
PAYEE	(a) Payee name	<u> </u>	(b) Payee address;	City, State	e, Zip Code
			3730 S. Las Vegas Blvd		
	Aria Hotel				
			Las Vegas, NV 89158		
PURPOSE OF	(a) Category (See Categories listed at the top	of this cohodule)	(b) Description		· · · · ·
EXPENDITURE	Travel Out of District	of this schedule)	Lodging Political Roundta	ble Meeting Las Vega	as
X Political	2.5.0.2.5.100				
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held	
expenditure to benefit C/OH					

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeriolder/Folitica		ruction Guide explains how	to complete this for		TTIEN (enter a catego	ry not listed a	bove)
1 Total pages Schedule F4:	2 FILER NAME	<u> </u>			3 Filer ID (Ethi	ics Commiss	sion Filers)
Sch: 46/49 Rpt: 67/71		rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UI EXPENDITUR CHARGED TO CARD	RES	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issue	r Paid		
	\$122.01	05/23/2024					
7 PAYEE	(a) Payee name		(b) Payee addres	SS;	City,	State,	Zip Code
	Hotel Emma		136 East Gray	son			
			San Antonio, 1	X 78215			
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Donor Meeting	J			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Ch	eck if Austin, TX,	officeholder living exp	oense	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issue	r Paid		
	\$75.73	06/07/2024					
PAYEE	(a) Payee name		(b) Payee addres	ss;	City,	State,	Zip Code
	El Paso Conventior	n Center F&B	C Street				
			El Paso, TX 79	9901			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Food and Beve	erage TDP	Convention		
X Political	T Ood/Beverage Exper	1150					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Che	eck if Austin, TX,	officeholder living exp	oense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credi	t Card Issuer	r Paid		
	\$465.85	06/11/2024					
PAYEE	(a) Payee name		(b) Payee addres	SS;	City,	State,	Zip Code
	Austin Proper Hotel	I	600 W 2nd Str	eet			
			Austin, TX 787	'01			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	of this schedule)	Lodging for Me	eetings in A	ustin		
X Political	Travel Out of District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Ch	eck if Austin, TX,	officeholder living exp	oense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought		Office held		
experience to belieff 6/011							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
Sch: 47/49 Rpt: 68/71	Martinez Fischer, T	rey (The Honorable)			00040542			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED ITURES ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$5,000.00	06/21/2024						
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	House Democratic	Campaign	PO Box 19					
	(a) Cataman		Austin, TX					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descript Contribution					
X Political	Contributions/Donatio		Continuation) i i				
Non-Political	—	of Texas. Complete Schedule T.		Chack if Austin TY	, officeholder living exp	ense		
9 Complete ONLY if direct	Candidate/Officeholder	<u> </u>	<u>L</u> e sought	Check ii Austin, 1A	Office held	ense		
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$129.30	04/23/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	Ironworks BBQ		100 Red F	River St.				
			Austin, TX	78701				
PURPOSE OF	(a) Category	of Alvin and a dulla	(b) Descript					
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Expe	·	Staff Lunc	h				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	er Paid			
	\$105.25	04/19/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
	Down on Grayson		303 E. Gra	ayson				
			San Anton	io, TX 78215				
PURPOSE OF	(a) Category	of this cohodula)	(b) Descript					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Staff Lunc	h				
X Political								
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
expenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************		,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commis	sion Filers)
Sch: 48/49 Rpt: 69/71	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$291.76	04/24/2024					
7 PAYEE	(a) Payee name Aba		(b) Payee 1011 Sou	address; uth Congress	City,	State,	Zip Code
			Austin, T				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
X Political	Food/Beverage Expe		Staff Lun	cn			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$191.09	05/08/2024					
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	HEB		701 S. C	apitol of Texas H	wy		
			Austin, T	X 78746			
PURPOSE OF	(a) Category	-6 Abric In It - 1	(b) Descrip				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Snacks,	Supplies and Bev	erages Capitol	Office	
X Political							
Non-Political	`	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$177.67	05/13/2024					
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	Central Market		4821 Bro	adway			
	Central Market						
	() 0 :			onio, TX 78209			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	otion d Snacks for Com	munity Event		
X Political	Event Expense	•	ן רטטט מוונ	i Shacks for Coll	iiiiuiiity EVEIIL		
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officefiolder	name Office	= อบนหูกเ		Onice nelu		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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

Candidate/Oniceriolder/Folitica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how		omplete thi		TTIEN (enter a categor	y not listed a	bove)
1 Total pages Schedule F4:	2 FILER NAME	-		-		3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 49/49 Rpt: 70/71		rey (The Honorable)				00040542		
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s) C	Credit Card Issue	r Paid		
	\$164.24	05/02/2024						
7 PAYEE	(a) Payee name		(b)) Payee ad	ddress;	City,	State,	Zip Code
	Bistro 09		63	106 Broa	dway			
			Al	amo Hei	ghts, TX 78209			
8 PURPOSE OF	(a) Category		1 ` ') Descripti				
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper	*	St	taff meeti	ng			
X Political	T God/Bovorago Expor							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e so	ught		Office held		
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s) C	Credit Card Issue	r Paid		
	\$186.37	05/16/2024						
PAYEE	(a) Payee name		(b)) Payee ad	ddress;	City,	State,	Zip Code
	Liberty Bar		13	111 South	n Alamo Street			
			S	an Antoni	io, TX 78210			
PURPOSE OF	(a) Category		(b)) Descripti	on			
EXPENDITURE	(See Categories listed at the top Food/Beverage Exper		St	taff Lunch	า			
X Political	T ood/Beverage Exper	150						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e so	ught	_	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c)	Date(s) C	Credit Card Issue	r Paid		
	\$337.88	06/06/2024						
PAYEE	(a) Payee name		(b)) Payee ac	ddress;	City,	State,	Zip Code
			20	09 N. Sta	nton			
	Stanton House							
			El	Paso , T	X 79901			
PURPOSE OF	(a) Category	of this cohod: 1-1	1 ` ') Descripti				
EXPENDITURE ——	(See Categories listed at the top Food/Beverage Exper	*		inner eve onventior	ent with Staff, C	olleagues and	Supporte	ers TDP
X Political				onventior	1			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e so	ught		Office held		
	ı							

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: 71/71 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Martinez Fischer, Trey (The Honorable) 00040542 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Spirit Airlines 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule D Schedule F1 Schedule B(J) Schedule C2 Schedule F4 Schedule F2 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Martinez Fischer, Trey (The Honorable) 8 Departure city or name of departure location 05/16/2024 San Antonio 9 Destination city or name of destination location 05/17/2024 Las Vegas 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Political and Policy Roundtable Commercial Airplane