#### FORM C/OH CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID Total pages filed: The C/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 36 00088039 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** Vincent NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Perez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** 649 Londonderry Road MAILING Receipt # Amount **ADDRESS** Change of Address El Paso, TX 79907 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Jorge NAME NICKNAME LAST **SUFFIX** Perez **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 7950 San Paulo Drive **ADDRESS** (Residence or Business) El Paso, TX 79915 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (915) 740-1228 **PHONE** REPORT **TYPE** January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)

July 15

Day

Day

11/05/2024

OFFICE HELD (if any)

**ELECTION DATE** 

05/19/2024

Year

Year

None Place El Paso District 77 El Paso

Х

Month

Month

**PERIOD** 

10 ELECTION

11 OFFICE

**COVERED** 

8th day before election

**THROUGH** 

Primary

χ General

Exceeded modified

Month

**ELECTION TYPE** 

Runoff

Special

Day

06/30/2024

12 OFFICE SOUGHT (if known)

reporting limit

Final Report (Attach C/OH-FR)

Year

Other

State Representative Place El Paso District 77

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 36

13 C / OH NAME	Perez, Vincent		<b>14</b> Filer ID (	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without I officeholders are required to report this information	the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		I ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	<b>\$</b> 11,285.91
EXPENDITURE TOTALS	3. TOTAL UNITEM	ZED POLITICAL EXPENDITURES		\$ 0.00
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 21,278.08
CONTRIBUTION BALANCE	REPORTING PE			\$ 2,646.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 25,000.00
<b>17</b> AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		•	√incent Perez	
		Signature of	Candidate or Officeholo	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office.		
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

# **SUBTOTALS - C/OH**

# FORM C/OH COVER SHEET PG 3

3 of 36

					3 01 30
<b>18</b> FIL	ER NAN	AE	19 Filer ID	(Eth	ics Commission Filers)
Pe	rez, Vir	00088039			
	HEDUL		SUBTOTAL AMOUNT		
NA	ME OF	SCHEDULE			
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	8,860.00
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,425.91
3.	. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	
4.	Х	X SCHEDULE E: LOANS			8,000.00
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	i e	\$	21,278.08
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	NS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	NS	\$	
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			\$		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	LE A1
	The Instruc	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 1/2 Rpt: 4/36	
2	FILER NAME Perez, Vince	ent			3	Filer ID (Ethics Commission 00088039	on Filers)
4	Date 05/20/2024			7	Amount of Contribution (\$)	\$1,000.00	
8	Principal occu Lobbyist	Austin, TX 78701  occupation / Job title (See Instructions)  9		j ;)			
	Date 05/19/2024	05/19/2024 Castruita, Manny (Mr.)  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
	El Paso, TX 79903  Principal occupation / Job title (See Instructions)  Assistant Director  Employer (See Instruction Radford School		<u> </u> 5)				
	Date 05/23/2024				Amount of Contribution (\$)	\$2,500.00	
	Dringing! aggs	El Paso, TX 79901		Employer (Coo Instructions	<u></u>		
	Chairman	pation / Job title (See Instructions	)	Employer (See Instructions Hunt Companies	·)		
Date Full name of contributor out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$5.00		
Principal occupation / Job title (See Instructions) none			Employer (See Instructions Not Employed	<u>(</u>			
	Date Full name of contributor out-of-state PAC (ID#:)  06/29/2024 Lemmond, Bryon (Mr.)  Contributor address; City; State; Zip Code  Katy, TX 77449			Amount of Contribution (\$)	\$5.00		
	Principal occu none	pation / Job title (See Instructions	5)	Employer (See Instructions Not Employed	5)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	LE A1
	The Instruc	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 2/2 Rpt: 5/36	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Perez, Vince		_			00088039	
4	Date 05/20/2024			7	Amount of Contribution (\$)	\$500.00	
	El Paso, TX 79912						
8	Principal occu	pation / Job title (See Instructions	9	Employer (See Instructions	<u>.                                    </u>		
	Senior Advis	or		Moreno Cardenas Inc.			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)	
	05/24/2024	Saegert, Carolyn (Ms.)	out of state 1 AC (ID#			7 another of Contribution (4)	\$100.00
	03/24/2024		hata. Zin Cada		-		Ψ100.00
	Contributor address; City; State; Zip Code						
		Austin, TX 78759					
		pation / Job title (See Instructions	6)	Employer (See Instructions			
	Lobbyist Ancira Strategic Par		Ancira Strategic Partner	S 			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	05/20/2024	Texans for Lawsuit Refor	m PAC				\$2,500.00
		Contributor address; City; Si Houston , TX 77019	iate; Zip Code				
	Principal occu	pation / Job title (See Instructions	3)	Employer (See Instructions	<u>.                                    </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	06/13/2024		_	J		γιποαπι οι Contribution (φ)	\$500.00
	Contributor address; City; State; Zip Code			•		Ψ300.00	
	Dringing con	Austin, TX 78704	<u>,                                      </u>	Employer (Coo Instructions	<u>'</u>		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	o)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/21/2024	Zamora, Richard (CEO)					\$1,500.00
		Contributor address; City; S	tate; Zip Code				
		San Antonio , TX 78260					
		pation / Job title (See Instructions	6)	Employer (See Instructions			
	CEO			Texas Infrastructure De	vel	opment	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

			_	Λ4	7
SCF	1EC	UL	.E	A	_

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 6/36			
2 FILER NAME Perez, Vince			3 Filer ID (Ethics Commission Filers) 00088039			
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$			
5 Date 05/21/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:</li></ul>		8 Amount of contribution (\$) In-kind contribution description \$1,128.32   Text messages			
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)			
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)			
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 05/28/2024	Full name of contributor out-of-state PAC (ID#: TREPAC Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$508.95   text messages			
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.			
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)			
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	•				
Date 05/28/2024	Full name of contributor out-of-state PAC (ID#: TREPAC Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$788.64   text messages			
	Austin, TX 78701					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)			
Contributor's principal occupation (FOR JUDICIAL)  Contributor's job title (FOR JUDICIAL) (See instructions)						
Contributor's	Contributor's employer/law firm (FOR JUDICIAL)  Law firm of contributor's spouse (if any) (FOR JUDICIAL)					
If contributor	If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

LOANS	SCHEDULE E
The Instruction Guide explains how to complete this form.	1 Total pages Schedule E: Sch: 1/1 Rpt: 7/36
2 FILER NAME Perez, Vincent	3 Filer ID (Ethics Commission Filers) 00088039
TOTAL OF UNITEMIZED LOANS	\$
5 Date of loan 7 Name of lender out-of-state PAC (ID#: 05/27/2024 Perez, Vincent (Mr.)	9 Loan Amount (\$) \$8,000.00
6 Is lender a financial institution?  8 Lender address; City; State; Zip	Code 10 Interest Rate
No El Paso , TX 79907	11 Maturity Date
12 Principal occupation / Job title (See Instructions) 13 Emploid consultant Self	yer (See Instructions)
14 Description of Collateral  X None  15 Check	if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION 17 Name of guarantor	19 Amount Guaranteed (\$)
X not applicable 18 Guarantor address; City; State; Zip	Code
20 Principal occupation 21 Emplo	yer (See Instructions)

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/29 Rpt: 8/36	Perez, Vincent 00088039
4	Date	5 Payee name
	06/23/2024	AT&T
6	Amount (\$) \$70.35	7 Payee address; City; State; Zip Code
		El Paso, TX
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  campaign phone
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/23/2024	AT&T
	Amount (\$) \$65.33	Payee address; City; State; Zip Code
		El Paso, TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  campaign phone
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	06/06/2024	ActBlue
	Amount (\$) \$150.00	Payee address; City; State; Zip Code 366 Summer St.
		Sommerville , MA 02144
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense donation to Democratic Party for golf tournament fundraiser
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Payment Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to	complete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/29 Rpt: 9/36	Perez, Vincent	00088039
4	Date	5 Payee name	
	05/22/2024	Airport Printing Service	
6	Amount (\$)	7 Payee address; City; State; Zip	Code
	\$389.69	7 Leigh Fisher Blvd.	
		El Paso, TX 79906	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			printing
9	Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
	expenditure to benefit C/OI		
F	Date	Payee name	
	05/20/2024	Allprint of El Paso	
	Amount (\$)	Payee address; City; State; Zip	Code
	\$184.99	7230-D Gateway E	
		El Paso, TX 79915	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Printing Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense printing
			Printing
Н	Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	06/03/2024	Artlogo	
	Amount (\$)	Payee address; City; State; Zip	Code
	\$138.90		
		Kington United Kingdom	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			logo
			1.5
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office s	ought Office held
	expenditure to benefit C/OI		

### 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/Political Committee Credit Card Payment		w to complete this form.	OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2 FILE	R NAME		3 Filer ID (Ethics Commission Filers)
Sch: 3/29 Rpt: 10/36 Pere	ez, Vincent		00088039
4 Date 5 Paye	ee name		
05/29/2024 Best	t Buy		
6 Amount (\$) 7 Paye	ee address; City; State;	Zip Code	
\$161.86 815	Sunland Park Dr.		
EIP	aso, TX 79912		
8 PURPOSE (a) Cate	egory (See Categories listed at the top of this schedu	(b) Description	
OF Office Office	ce Overhead/Rental Expense		outside of Texas. Complete Schedule T.
		office supplie	n, TX, officeholder living expense
		отпес заррпе	
9 Complete ONLY if direct Candi	date/Officeholder name Offi	ce sought	Office held
expenditure to benefit C/OH	date/officeriolaer flame	cc sought	Office field
Date Pave	20.0000		
, .	ee name		
	tillo, Kimberely		
, ,	ee address; City; State; 2	Zip Code	
\$64.00			
el pa	aso, TX		
PURPOSE (a) Cate	egory (See Categories listed at the top of this schedu	(b) Description	
OF Sala	aries/Wages/Contract Labor		outside of Texas. Complete Schedule T.
		<b>-</b>	n, TX, officeholder living expense
		canvassing	
Complete ONLY if direct Candi	date/Officeholder name Offi	ce sought	Office held
expenditure to benefit C/OH	date/Officeriolder frame	ce sought	Office field
	ee name		
	le K		
` '	, ,,	Zip Code	
\$20.23   1239	9 N Zaragoza		
EI P	aso, TX 79907		
PURPOSE (a) Cate	egory (See Categories listed at the top of this schedu		
I EXPENDITURE I	nsportation Equipment And Related	, <u>u</u>	outside of Texas. Complete Schedule T.
Exp	ense		n, TX, officeholder living expense
		gas for canva	معدا
Complete ONLY if direct Candi	date/Officeholder name Offi	ce sought	Office held
expenditure to benefit C/OH	uate/Officeriolider frame Offi	ce sought	Office field

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula 54:	
1	, ,	
L	Sch: 4/29 Rpt: 11/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/26/2024	Circle K
6	Amount (\$)	7 Payee address; City; State; Zip Code
ľ	\$20.02	1239 N Zaragoza
	Ψ20.02	1200 W Zurug02u
		El Paso, TX 79907
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related
	LAFENDITORE	Expense Check if Austin, TX, officeholder living expense
		gas for canvasser
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H	Date	Payee name
	05/27/2024	Circle K
_		
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.28	1239 N Zaragoza
		El Paso, TX 79907
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Transportation Equipment And Related  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Expense Check if Austin, TX, officeholder living expense
		gas for canvasser
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		
	Date	Payee name
L	05/29/2024	Circle K
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.69	1239 N Zaragoza
		El Paso, TX 79907
	DUDDOCT	I
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if traval outside of Taxas, Complete Schedule T
	EXPENDITURE	Transportation Equipment And Related  Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Expense Check if Austin, TX, officeholder living expense gas for canvasser
		gas tot sativasset
	Complete ONU V if allow	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	The straight of the straight of the	

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 5/29 Rpt: 12/36	Perez, Vincent 00088039
4	Date	5 Payee name
	06/03/2024	City of El Paso Electronic Parking Meter System
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.03	
		El Paso, TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	parking meter Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  parking for meeting
		parking for meeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	06/06/2024	City of El Paso Electronic Parking Meter System
_	Amount (\$)	Payee address; City; State; Zip Code
	\$2.03	
	<del>+</del> =.00	
		El Paso, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	parking meter Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		parking for meeting
		parting to mosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/25/2024	Cognent
	Amount (\$)	Payee address; City; State; Zip Code
	\$650.00	P.O. Box 536421
		Orlando, FL 32853
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Website fee
		website ice
_	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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.	(enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer II	) (Ethics Commission Filers)
	Sch: 6/29 Rpt: 13/36	Perez, Vincent 00088	3039
4	Date	5 Payee name	
	06/20/2024	Cognent	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$90.00	P.O. Box 536421	
		Orlando, FL 32853	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Tex	
		Check if Austin, TX, officehol website fee	der living expense
		mesone iso	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought O	ffice held
	expenditure to benefit C/O		
F	Date	Payee name	
	05/23/2024	De Lara, Gael	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.92		
		El Paso, TX	
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	as. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officehol	der living expense
		canvassing	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought O	ffice held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	moc riciu
⊨	Date	Payee name	
	05/23/2024	De Lara, Gael	
⊢	Amount (\$)	Payee address; City; State; Zip Code	
	\$124.00		
		El Paso, TX	
┝	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Salaries/Wages/Contract Labor Check if travel outside of Tex	as. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officehol	der living expense
		canvassing	
$\vdash$	Complete ONLY if divert	Candidate/Officeholder name Office sought O	ffice held
	Complete ONLY if direct expenditure to benefit C/OH	· · · · · · · · · · · · · · · · · · ·	nice nelu
$\vdash$			

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/29 Rpt: 14/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/29/2024	De Lara, Gael
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$560.00	
		El Paso, TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  canvassing
		Canvassing
Ļ	0 1: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0: 0:	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L	<u> </u>	
	Date	Payee name
	05/30/2024	De Lara, Gael
	Amount (\$)	Payee address; City; State; Zip Code
	\$80.00	
		El Paso, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  canvassing
		Canvassing
L	Commiste ONII V if diseast	Condidate/Officeholder neme
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	<u> </u>	
	Date	Payee name
	05/30/2024	De Lara, Gael
	Amount (\$)	Payee address; City; State; Zip Code
	\$124.00	
		El Paso, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
I		canvassing
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/Ol	¬

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Travel in Travel O ontract Labor OTHER

	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: 8/29 Rpt: 15/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/30/2024	De Lara, Saeed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$80.00	
		El Paso, TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  canvassing
		Canvassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	05/30/2024	De Lara, Saeed
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.00	Tayee address, Sity, State, 216 Code
	Ψ-0.00	
		El Paso, TX
	DUDDOCE	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Canvassing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/04/2024	De Lara, Saeed
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.78	
		El Paso, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		canvassing
L	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

	Credit Card Payment	The Instruction Guide explains how to d	-	ete this form.
1	Total pages Schedule F1:	<u> </u>		3 Filer ID (Ethics Commission Filers)
	Sch: 9/29 Rpt: 16/36	Perez, Vincent		00088039
4	Date	5 Payee name		•
	06/08/2024	Dome Bar		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$147.33	10 Henry Trost Ct		
		TX 79901		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE			Check if Austin, TX, officeholder living expense
				social event democratic convention
			1_	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
	Date	Payee name		
	06/08/2024	El Mirador		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$71.55	10 Henry Trost Ct		
		El Paso, TX 79901		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense
				social event democratic convention
	Complete ONLY if direct	Candidate/Officeholder name Office so	liaht	Office held
	expenditure to benefit C/OI		ug	
H	Date	Payes name		
	06/07/2024	Payee name El Paso Parking		
		•	` a al a	
	Amount (\$)	Payee address; City; State; Zip C	oue	
	\$13.00			
		El Paso, TX		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	parking fee		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				parking for democratic convention
				parang for democratic convention
_	Complete ONLY if direct	Candidate/Officeholder name Office so	Light	Office held
	expenditure to benefit C/OI		agni	Office Hold
_				
L	· · · · · = -			

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Credit Card Payment		The Instruction Guide explains h	now to cor	nple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 10/29 Rpt: 17/36		Perez, Vincent			00088039
4	Date	5	Payee name			
	06/07/2024		El Paso Parking			
6	Amount (\$) \$13.00	7	Payee address; City; State;	Zip Co	de	
			El Paso, TX			
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche parking fee	edule)	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense parking for democratic convention
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ght	Office held
	Date		Payee name			
	06/08/2024		El Paso Parking			
	Amount (\$) \$13.00		Payee address; City; State;	Zip Co	de	
			El Paso, TX			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche parking fee	edule)	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense parking for democratic convention
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ght	Office held
	Date 05/20/2024		Payee name Fernandez, Liliana			
	Amount (\$) \$249.44			Zip Co	de	
			El Paso, TX			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Salaries/Wages/Contract Labor	edule)	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense canvassing
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ght	Office held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 11/29 Rpt: 18/36	2 FILER NAME Perez, Vincent	3 Filer ID (Ethics Commission Filers) 00088039
4	Date 05/20/2024	5 Payee name GECU	
6	Amount (\$) \$5.00	7 Payee address; City; State; Zip Code	
		el paso, TX	
8	PURPOSE OF EXPENDITURE	1 663	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 05/31/2024	Payee name GECU	
	Amount (\$) \$28.50	Payee address; City; State; Zip Code	
		El Paso, TX	
	PURPOSE OF EXPENDITURE	1 003	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 06/28/2024	Payee name GoDaddy	
	Amount (\$) \$74.32	Payee address; City; State; Zip Code 2155 E GoDaddy Way	
		Tempe, AZ 85284	
	PURPOSE OF EXPENDITURE	1 1 003	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/ON	Candidate/Officeholder name Office sought	Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 12/29 Rpt: 19/36	Perez, Vincent 00088039
4	Date	5 Payee name
	06/28/2024	GoDaddy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.16	2155 E GoDaddy Way
		Tempe, AZ 85284
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Website fee
		Website fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	06/03/2024	Google
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$23.03	1600 Amphitheatre Pkwy
		mountain view , CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  email fee
		3.1.st. 133
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	05/30/2024	Greer, Patricia
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$368.00	
		El Paso, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		canvassing
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/29 Rpt: 20/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/30/2024	Hernandez, Luis Carlos
6	Amount (\$) \$956.96	7 Payee address; City; State; Zip Code
		El Paso, TX
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense canvassing
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/26/2024	Hernandez, Luis Carlos
	Amount (\$) \$126.08	Payee address; City; State; Zip Code
		El Paso, TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense canvassing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/28/2024	Herrera , Enrique
	Amount (\$) \$238.08	Payee address; City; State; Zip Code
		El Paso, TX
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense canvassing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

# SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Candidate/Officeholder/Politica Credit Card Payment			Salaries/V	Vages	es/Contract Labor OTHER (enter a category not listed above)
_		-	The Instruction Guide ex	pianis now to co	ilipie	<u> </u>
1	Total pages Schedule F1:	2	FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 14/29 Rpt: 21/36		Perez, Vincent			00088039
4	Date	5	Payee name			
	06/05/2024		Jason's Deli			
6	Amount (\$)	7	Payee address; City;	State; Zip Co	nde	
•	\$34.45	ľ	8889 Gateway Blvd W #1000	O. C.	,	
	Ψ0+.+0	l	5005 Gateway Biva W #1000			
			El Paso, TX 79925			
8	PURPOSE	(a)	Category (See Categories listed at the top o	f this schedule)	(b)	Description
	OF EXPENDITURE		Food/Beverage Expense	,		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	l				Check if Austin, TX, officeholder living expense
		l				retired teacher association meeting
9	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght	t Office held
	expenditure to benefit C/OI	Н				
	Date	Π	Payee name			
	05/30/2024		Llanas Ramos , Luis Emilio			
		L		0:: 7: 0		
	Amount (\$)		Payee address; City;	State; Zip Co	ode	
	\$528.00					
			El Paso, TX			
	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.
	EXPENDITURE	l	ŭ			Check if Austin, TX, officeholder living expense
						canvassing
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght	t Office held
	expenditure to benefit C/OI	Н				
	Date		Payee name			
	05/28/2024		Martinez, Erick			
		H	<u> </u>	0: : 7: 0		
	Amount (\$)		Payee address; City;	State; Zip Co	ode	
	\$480.00					
			Horizon, TX			
	PURPOSE	(a)	Category (See Categories listed at the top of	f this schedule)	(b)	) Description
	OF	l`	Salaries/Wages/Contract Labor	i tilis scriedule)	`´	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	l	Calaires, trages, Confider Last.			Check if Austin, TX, officeholder living expense
						canvassing
	Complete ONLY if direct		Candidate/Officeholder name	Office sou	ght	t Office held
	expenditure to benefit C/OH					

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 15/29 Rpt: 22/36	Perez, Vincent 00088039	
4	Date	5 Payee name	_
	05/29/2024	Martinez, Erick	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$496.00		
		Horizon, TX	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		canvassing	
		in the second se	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	<del>-</del>	
F	Date	Payee name	-
	05/30/2024	Medina, Axel Fernando	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$320.00		
		El Paso, TX	
H	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.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		canvassing	
L	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held	_
	Complete ONLY if direct expenditure to benefit C/OH		
⊨	Data	David and the second se	_
	Date 06/21/2024	Payee name Medina, Axel Fernando	
L		<u> </u>	_
	Amount (\$) \$31.52	Payee address; City; State; Zip Code	
	Ψ31.32		
		El Paso, TX	
L	DUDDOCE		_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		canvassing	
L			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
_			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
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

l	Credit Card Payment	The Instruction Guide explains how to complete this form.	,
1	Total pages Schedule F1:	2 FILER NAME 3 File	er ID (Ethics Commission Filers)
L	Sch: 16/29 Rpt: 23/36	Perez, Vincent 000	088039
4	Date	5 Payee name	
L	06/21/2024	Medina, Axel Fernando	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$80.00		
		El Paso, TX	
8	PURPOSE		
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of	Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, office	eholder living expense
		canvassing	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
⊨	Date	Payee name	
	05/20/2024	Office Depot	
Н	Amount (\$)	Payee address; City; State; Zip Code	
	\$119.06		
l			
		El Paso, TX 79925	
	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 Check if Austin, TX, office	Texas. Complete Schedule T. eholder living expense
		office supplies	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Oi	л -	
	Date	Payee name	
	05/24/2024	Office Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$108.21	1111 Geronimo Dr.	
		El Paso, TX 79925	
H	PURPOSE		
	OF	, , , , , , , , , , , , , , , , , , , ,	Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, office	eholder living expense
		office supplies	
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Omos noiu
$\vdash$			

#### 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

	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: 17/29 Rpt: 24/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/25/2024	Office Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$119.06	1111 Geronimo Dr.
		El Paso, TX 79925
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  office supplies
		office supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	05/27/2024	Office Depot
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$116.00	1111 Geronimo Dr.
	Ψ110.00	1111 Goldming Bi.
		El Paso, TX 79925
	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
		office supplies
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
⊨	Date	Pouso namo
	05/27/2024	Payee name Office Depot
L		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$102.25	1111 Geronimo Dr.
		EL Doco . TV 7003E
L		El Paso, TX 79925
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		office supplies
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
Г		
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### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

Credit Card Payment	The Instruction Guide explains how to co	mplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 18/29 Rpt: 25/36	Perez, Vincent	00088039
4 Date	5 Payee name	•
05/28/2024	Office Depot	
6 Amount (\$)	7 Payee address; City; State; Zip Co	de
\$62.77	1111 Geronimo Dr.	
	El Paso, TX 79925	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	· I	Check if Austin, TX, officeholder living expense
		office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office soul H	ght Office held
Date	Payee name	
05/29/2024	Old Sheepdog Brewery	
Amount (\$)	Payee address; City; State; Zip Co	de
\$2,212.11	3900 Rosa Ave.	
	El Paso, TX 79905	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  watch party
		nation party
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O		
Date	Payee name	
06/05/2024	PDX printing	
Amount (\$)	Payee address; City; State; Zip Co	de
\$46.22	208 Octavia St	
*		
	El Paso, TX 79901	
PURPOSE		(h) Description
OF	(a) Category (See Categories listed at the top of this schedule)  Printing Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	1 mining Expense	Check if Austin, TX, officeholder living expense
		business cards
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght Office held
expenditure to benefit C/O	п	

### SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	. •	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/29 Rpt: 26/36	Perez, Vincent	00088039
4		5 Payee name	
Ļ	05/23/2024	Peerly	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,029.97	2232 Dell Range Blvd #287	
		Cheyenne, WY 82009	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	texting Check if trav	el outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Aus MMS textin	tin, TX, officeholder living expense
		MINIS LEXUIT	y piationn
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
F	Date	Payee name	
	05/29/2024	Peerly	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$359.82	2232 Dell Range Blvd #287	
		Ol a service May 20000	
L		Cheyenne, WY 82009	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  SMS Texting  (b) Description  Check if trav	el outside of Texas. Complete Schedule T.
	EXPENDITURE	Sivis rexuing	tin, TX, officeholder living expense
		Peer-to-Pe	er messaging
L	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	•	Office field
F	Date	Payee name	
	05/25/2024	Peter Piper Pizza	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.90	700 N Zaragoza Rd.	
		El Paso, TX 79907	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	el outside of Texas. Complete Schedule T.
	EXPENDITURE	1 00d/beverage Expense	tin, TX, officeholder living expense
		food for car	ivassers
L	Operation ON V. V. P.	Constitute (Office helders are	Office held
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
$\vdash$			
ı			

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T-t-1		
1	Total pages Schedule F1:		)
L	Sch: 20/29 Rpt: 27/36	Perez, Vincent 00088039	
4	Date	5 Payee name	
	05/27/2024	Peter Piper Pizza	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	\$57.00	700 N Zaragoza Rd.	
	Ψ37.00	700 N Zaragoza Na.	
		El Paso, TX 79907	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
		Check if Austin, TX, officeholder living expense	
		food for canvassers	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	IT.	
	Date	Payee name	
	05/20/2024	Peter Piper Pizza	
$\vdash$	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.90	700 N Zaragoza Rd.	
	Ψ13.30	700 N Zaragoza Na.	
		El Paso, TX 79907	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		food for canvassers	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L		•	
	Date	Payee name	
	05/24/2024	Prado, Victoria	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$800.00	200 Desert Pass Street Apt. 536	
	,	· ·	
		EL Daso, TV 70012 2677	
		El Paso, TX 79912-3677	
	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 TV, officeholder living expanse.	
		Check if Austin, TX, officeholder living expense  campaign manager	
		Campaign manager	
_	Complete ONLY if direct	Condidate/Officeholder name Office sought	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	·		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/29 Rpt: 28/36	Perez, Vincent 00088039
4	Date	5 Payee name
	06/03/2024	Prado, Victoria
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,600.00	200 Desert Pass Street Apt. 536
		El Paso, TX 79912-3677
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		campaign manager
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	06/20/2024	Prado, Victoria
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	200 Desert Pass Street Apt. 536
	Ψ300.00	200 Desert Pass Street Apr. 330
		El Paso, TX 79912-3677
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		campaign manager
	Operation ONLY if alice at	Our didn't lotter had a grant of the country of the
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/21/2024	Reyes, Diana
	Amount (\$)	Payee address; City; State; Zip Code
	\$367.84	
L		el paso, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Capyassing
		canvassing
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

se Travel in District
nse Travel Out of District
es/Contract Labor OTHER (enter a cate

	Credit Card Payment	The Instruction Guide explains how to con	nple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 22/29 Rpt: 29/36	Perez, Vincent		00088039
4	Date	5 Payee name		<u> </u>
	05/28/2024	Reyes, Diana		
6	Amount (\$) \$356.00	7 Payee address; City; State; Zip Coo	le	
		El Paso, TX		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense canvassing
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	jht	Office held
	Date	Payee name	_	
	05/29/2024	Rivera, Alex		
	Amount (\$) \$194.72	Payee address; City; State; Zip Coo	le	
		El Paso, TX		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense canvassing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ıht	Office held
	Date	Payee name		
	05/24/2024	Rodriguez, Adalberto		
	Amount (\$) \$800.00	Payee address; City; State; Zip Coo 1438 Jim Larabel	le	
		El Paso, TX 79936		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  canvassing
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office soug	ıht	Office held
<u> </u>	rme provided by Tayas E	thics Commission www.athics state ty us		Version V// 1.0 d278aha

### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica 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: 23/29 Rpt: 30/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/25/2024	Rodriguez, Adalberto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	1438 Jim Larabel
		El Paso, TX 79936
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		canvassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/29/2024	Payee name Rodriguez, Adalberto
	Amount (\$)	Payee address; City; State; Zip Code
	\$800.00	1438 Jim Larabel
	!	
		El Paso, TX 79936
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	!	canvassing
	!	3
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
H	Date	Payee name
	05/20/2024	Sam's
H		
	Amount (\$) \$45.25	Payee address; City; State; Zip Code 9498 gateway n. blvd
	Ψ40.20	9490 galeway 11. bivu
	!	-1 TV 70004
	!	el paso, TX 79924
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if travel outside of Taxas, Complete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	!	stamps
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	<del>1</del>

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_			
1	Total pages Schedule F1: Sch: 24/29 Rpt: 31/36	2 FILER NAME Perez, Vincent  3 Filer ID (Ethics Commission Filers) 00088039	
4	Date	5 Payee name	
•	05/23/2024	Sam's	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5.98	9498 gateway n. blvd	
		el paso, TX 79924	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		water for canvassers	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
_	Date	Payee name	_
		USPS	
	05/20/2024	05P5	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$272.00	880 N. Zaragoza Rd.	
		El Paso , TX 79907	
	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	
		stamps	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
H	Data	Davies warms	_
	Date	Payee name	
	05/22/2024	USPS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$68.00	880 N. Zaragoza Rd.	
		El Paso , TX 79907	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		stamps	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

l	Credit Card Payment	The Instruction Guide explains how to cor	mple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 25/29 Rpt: 32/36	Perez, Vincent		00088039
4	Date	5 Payee name		
L	05/25/2024	Vallejo , Jacob		
6	Amount (\$) \$581.28	7 Payee address; City; State; Zip Cod	de	
	,,,,,			
		El Paso, TX		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				canvassing
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
L	·			
	Date 05/29/2024	Payee name		
L		Vallejo , Jacob  Payee address; City; State; Zip Coo	do	
	Amount (\$) \$384.00	Payee address; City; State; Zip Cod	ue	
	400 1100			
		El Paso, TX		
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				canvassing
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
L	expenditure to benefit C/OI			
	Date	Payee name		
	05/27/2024	Walgreens	_	
	Amount (\$) \$17.30	Payee address; City; State; Zip Coo N Zaragoza Rd.	ae	
	Φ17.50	iv Zurugozu iva.		
		El Paso, TX 79907		
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense office supplies
				•
Г	Complete ONLY if direct	Candidate/Officeholder name Office sout	ght	Office held
	expenditure to benefit C/OI	1		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 26/29 Rpt: 33/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/23/2024	beltran, andrea
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$126.08	
		el paso, TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  canvassing
		Carryassing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	Davies same
		Payee name
	05/30/2024	contreras, Bruno Miranda
	Amount (\$)	Payee address; City; State; Zip Code
	\$528.00	
		El Paso, TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Capyassing
		canvassing
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	05/23/2024	morales, jesus
	Amount (\$)	Payee address; City; State; Zip Code
	\$124.00	
		el paso, TX
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense  canvassing
		Canvassing
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

se Event Expense Loan Repayment/Reimbu

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

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

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

l	Credit Card Payment	The Instruction Guide explains how to d	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 27/29 Rpt: 34/36	Perez, Vincent		00088039
4	Date	5 Payee name		•
	05/30/2024	morales, jesus		
6	Amount (\$)	7 Payee address; City; State; Zip C	Code	
	\$512.00			
		FI Door TV		
Ļ	PURPOSE	El Paso, TX	10.3	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(D)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Galaries Wages Contract Labor		Check if Austin, TX, officeholder living expense
				canvassing
9	Complete ONLY if direct	Candidate/Officeholder name Office so	) Jught	Office held
	expenditure to benefit C/OI		Jugrit	Office field
H	Date	Payee name		
	05/23/2024	nevarez, iran		
H	Amount (\$)	Payee address; City; State; Zip C	Code	
	\$182.40			
		el paso, TX		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				canvassing
L				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ought	Office held
L				
	Date	Payee name		
	05/23/2024	nevarez, iran	`odo	
	Amount (\$) \$176.88	Payee address; City; State; Zip C	Joue	
	42.0.00			
		El Paso, TX		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense canvassing
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI	1		

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 28/29 Rpt: 35/36	Perez, Vincent 00088039
4	Date	5 Payee name
	05/22/2024	phillips , tyler
6	Amount (\$) \$42.08	7 Payee address; City; State; Zip Code el paso, TX
8	PURPOSE	
0	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Canvassing
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/20/2024	stamps.com
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 4301 bull creek road
		el paso, TX 78731
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  office supplies
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/27/2024	stamps.com
	Amount (\$) \$20.19	Payee address; City; State; Zip Code 4301 bull creek road
		el paso, TX 78731
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense stamps
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### 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:	
Sch: 29/29 Rpt: 36/36	Perez, Vincent 00088039
4 Date	5 Payee name
06/27/2024	stamps.com
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$30.29	4301 bull creek road
	el paso, TX 78731
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	stamps
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held