FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00062322 35 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Michael Paul NAME Date Received **ELECTRONICALLY FILED** 10/28/2024 NICKNAME LAST **SUFFIX** Gomez CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Daniel NAME NICKNAME LAST **SUFFIX** Ramirez **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (281) 493-5529 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 09/27/2024 10/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year Primary Runoff Other 11/05/2024 χ General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 129 Harris District Judge District 129

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 35

13 C / OH NAME	Gomez, Michael Pau	(The Honorable)		14 Filer ID 00062322	(Ethics Com	ımission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted These expenditures may have officeholders are required to r	been made without t	he candidate's or off	iceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TR	EASURER NAME			
		COMMITTEE CAMPAIGN TR	EASURER ADDRES	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	ZED POLITICAL CONTRIBUT	IONS(OTHER THAN	I PI EDGES I DANS		
TOTALS	CTRONICALLY)	\$	0.00			
	S)	\$	44,030.00			
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) EXPENDITURE TOTALS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES					\$	0.00
4. TOTAL POLITICAL EXPENDITURES						47,455.25
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTA RIOD	INED AS OF THE LA	AST DAY OF THE	\$	171,670.94
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTATING PERIOD	ANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		true and co	affirm, under penalty orrect and includes al 15, Election Code.	of perjury, that the a	accompanying d to be reporte	report is ed by me
			The Honoral	ble Michael Paul G	Gomez	
			Signature of	Candidate or Office	nolder	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
		aid		, this the		day
of						
Signature of office	cer administering oath	Printed name of officer ac	dministering oath	Title of office	cer administer	ing oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

				J V L I (3 of 35
	ER NAN mez, N	ME lichael Paul (The Honorable)	19 Filer ID 00062322	(Ethics (Commission Filers)
l		E SUBTOTALS SCHEDULE		SU	BTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	44,030.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	27,177.64
6.		\$			
7.		\$			
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	20,277.61
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	ONS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this 1	form.	1 Total pages Schedule A(J)1: Sch: 1/16 Rpt: 4/35
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Gomez, Mic	hael Paul (The Honorable)			00062322
4	Date 10/11/2024	5 Full name of contributor Adler, Jim	out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$5,000.00
	10/11/2024	6 Contributor address; City; St	ata: 7in Coda		
		Houston, TX 77027	ate, Zip Code		
8		Principal Occupation		9 Contributor's Job Title	
L	Attorney			Founding Attorney	
10		employer/law firm & Associates		11 Law firm of contributor's sp	pouse (if any)
12		s a child, law firm of parent(s) (if a	inv)		
			,,		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/22/2024	Ana Hernandez Campaigi	—	,	\$1,000.00
		Contributor address; City; State; Zip Code			"
		. ,,	, ,		
	Houston, TX 77220				
	Contributor's Principal Occupation Contributor's			Contributor's Job Title	
┢	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	iny)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	10/22/2024	Armando L Walle Jr Camp	oaign		\$1,000.00
		Contributor address; City; St	ate; Zip Code		· ·
L		Houston, TX 77039		I a	
	Contributor's I	Principal Occupation		Contributor's Job Title	
┢	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor i	s a child, law firm of parent(s) (if a	nny)		
\vdash					

	MONET	ARY POLITICAL	CONTRIBUTION	DNS			SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1		ges Schedule A(J)1 L6 Rpt: 5/35	l:
2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)
	Gomez, Micl	hael Paul (The Honorable)				000623	22	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount	of Contribution (\$)	
	10/10/2024	Aziz, Muhammad						\$5,000.00
		6 Contributor address; City;	State; Zip Code					
		Houston, TX 77002						
8	Contributor's F	Principal Occupation		9 Contributor's Job Title				
	Attorney			Partner				
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pous	e (if any)		
	Abraham Wa	atkins Nichols Agosto Aziz &	Stogner					
12	! If contributor is	s a child, law firm of parent(s) (if	f any)					
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount	of Contribution (\$)	
	10/24/2024	Baker & Hostetler LLP	_					\$250.00
		Contributor address; City;	State; Zip Code					
	Contributor's I	Houston, TX 77002 Principal Occupation		Contributor's Job Title				
	Contributor's 6	employer/law firm		Law firm of contributor's s	pous	e (if any)		
	If contributor is	s a child, law firm of parent(s) (if	f any)					
-	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount	of Contribution (\$)	
	10/04/2024	Baker & Hostetler LLP	out or otatio (7.0 (12.11)					\$500.00
		Contributor address; City;	State: Zin Code					,
			O. C.					
		Houston, TX 77002						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's s	pous	e (if any)		
	If contributor is	s a child, law firm of parent(s) (if	f any)					
		, .						

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1	Total pages Schedule A(J)1: Sch: 3/16 Rpt: 6/35
2	FILER NAME Gomez, Mic	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 10/07/2024	5 Full name of contributor Beck Redden, LLP6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77010				
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	10/17/2024 Berkman, Jeremy Contributor address; City; State; Zip Code				\$500.00	
		Houston, TX 77002				
		Principal Occupation		Contributor's Job Title		
	Controller			Controller		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Chamberlair					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/22/2024	Colon, Edgardo	_			\$1,000.00
		Contributor address; City; Houston, TX 77007	State; Zip Code			
\vdash	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Edgardo E. (Founding Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Attorney					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 4/16 Rpt: 7/35
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 10/17/2024	5 Full name of contributor Farah, George6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		Houston, TX 77006				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's e Farah Law	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)
	10/10/2024	Feldman, Cris Contributor address; City;	<u> </u>			\$500.00
		Houston, TX 77098				
		Principal Occupation		Contributor's Job Title		
	Attorney			Founding Partner		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Feldman & F					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/22/2024	Garcia, Juan	_			\$1,000.00
		Contributor address; City; Katy, TX 77494	State; Zip Code			
	Contributor's I	rincipal Occupation		Contributor's Job Title		
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Johnson Ga	rcia LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/16 Rpt: 8/35
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 10/22/2024	5 Full name of contributor Garcia, Roland6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77042				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Shareholder		
10	Contributor's of Greenberg 1	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	: any)			
	. Il contributor i	s a crima, law iiriir or parcrit(s) (ii	any)			
=	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	09/27/2024 Goldberg, Daniel Contributor address; City; State; Zip Code				\$180.00	
		Houston, TX 77004		1		
		Principal Occupation		Contributor's Job Title		
	Attorney Contributor's	employer/law firm		Founding Attorney Law firm of contributor's sp	2011	co (if any)
	Goldberg La	• •		Law iiiii oi continuttoi 3 3	Jou.	se (ii aiiy)
		s a child, law firm of parent(s) (if	any)	<u>l</u>		
			•			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/24/2024	Gomez, Sandra				\$250.00
		Contributor address; City; Houston, TX 77064				
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Managing Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Gomez Law	, PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

MONE	TARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
The Inst	ruction Guide explains ho	w to complete this	form.	1 Total pages Schedule A(J)1: Sch: 6/16 Rpt: 9/35
2 FILER NAM	ME Michael Paul (The Honorable)			3 Filer ID (Ethics Commission Filers) 00062322
	5 Full name of contributor	П (
4 Date 10/18/202		out-of-state PAC (ID#:)	7 Amount of Contribution (\$) \$250.00
10/10/202				φ230.00
	6 Contributor address; City;	State; Zip Code		
	Houston TV 77000			
0 0 17 1	Houston, TX 77006		In a	
	's Principal Occupation		9 Contributor's Job Title	
	lontgomery Hagans		Partner	
	's employer/law firm		11 Law firm of contributor's sp	oouse (if any)
Attorney				
12 If contribute	or is a child, law firm of parent(s) (i	fany)		
Date	Full name of contributor	out-of-state PAC (ID#:	,	Amount of Contribution (\$)
10/22/202		U out-of-state PAC (ID#.	·	\$1,000.00
10/22/202	Contributor address; City;	State: 7in Code		
	Continuator address, City,	State, Zip Code		
	Houston TV 77070			
0	Houston, TX 77079			
Contributor	's Principal Occupation		Contributor's Job Title	
Contributo	's employer/law firm		Law firm of contributor's sp	nouse (if any)
Contributor	3 cmployer/law lilli		Law iiiiii oi contributoi 3 3	ouse (ii uiiy)
If contribute	or is a child, law firm of parent(s) (i	f any)		
ii communic	or is a sima, law iiiii or parsin(s) (i			
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/18/202	Hunt, Megan			\$250.00
	Contributor address; City;	State: Zip Code		1
	Evanston, IL 60201			
Contributo			Contributor's Job Title	
	afety & Compliance Manager		Product Safety & Comp	liance Manager
	's employer/law firm		Law firm of contributor's sp	
CHAMPR				, ,,
If contribute	or is a child, law firm of parent(s) (i	f any)		

Houston, TX 77002 S Contributor's Principal Occupation Attorney 9 Contributor's Job Title Managing Attorney 11 Law firm of contributor's spouse (if any)		MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE	A(J)1	
Gomez, Michael Paul (The Honorable) 4 Date 10/22/2024 5 Full name of contributor out-of-state PAC (ID#*		The Instru	ction Guide explains ho	ow to complete this	form.	1			L:	
A Date 10/22/2024 Kretzer, Seth Spanning and contributor Out-of-state PAC (IDF:	2	FILER NAME				3	Filer ID	(Ethics Commissi	on Filers)	
10/22/2024 Kretzer, Seth \$250.00		Gomez, Mic	hael Paul (The Honorable)				0006232	22		
Houston, TX 77002	4		Kretzer, Seth)	7	Amount o	of Contribution (\$)	\$250.00	
Attorney 10 Contributor's employer/law firm Law Office of Seth Kretzer 12 If contributor is a child, law firm of parent(s) (if any) Date 10/22/2024 Full name of contributor out-of-state PAC (IDF:			Houston, TX 77002	·						
10 Contributor's employer/law firm Law Office of Seth Kretzer 12 If contributor is a child, law firm of parent(s) (if any) Date	8	Contributor's I	Principal Occupation		9 Contributor's Job Title					
Law Office of Seth Kretzer 12 If contributor is a child, law firm of parent(s) (if any) Date 10/22/2024 Full name of contributor		Attorney			Managing Attorney					
Date 10/22/2024 Full name of contributor out-of-state PAC (ID#:	10				11 Law firm of contributor's s	pou	se (if any)			
Date 10/22/2024 Full name of contributor out-of-state PAC (ID#:		Law Office of	of Seth Kretzer							
10/22/2024 Kroger, Bill \$250.00 Contributor address; City; State; Zip Code Houston, TX 77024 Contributor's Principal Occupation Lawyer Partner Contributor's employer/law firm Law firm of contributor's spouse (if any) Baker Botts Martin, Disiere, Jefferson, & Wisdom If contributor is a child, law firm of parent(s) (if any) Date 10/04/2024 Kwok, Robert Awok, Robert Contributor Out-of-state PAC (ID#: Amount of Contribution (\$) Contributor's Principal Occupation Attorney Contributor's Principal Occupation Attorney Contributor's employer/law firm Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Kwok Daniel LLP	12	2 If contributor i	s a child, law firm of parent(s) (if any)						
Contributor's Principal Occupation Lawyer Contributor's employer/law firm Baker Botts Date 10/04/2024 Kwok, Robert Contributor address; City; State; Zip Code Full name of contributor Contributor address; City; State; Zip Code Contributor's Principal Occupation Attorney Contributor's employer/law firm Contributor's employer/law firm Baker Botts Law firm of contributor's spouse (if any) Martin, Disiere, Jefferson, & Wisdom Amount of Contribution (\$) \$5,000.00 Contributor address; City; State; Zip Code Contributor's Principal Occupation Attorney Contributor's employer/law firm Kwok Daniel LLP Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)		Date	Full name of contributor	out-of-state PAC (ID#:			Amount o	of Contribution (\$)		
Contributor's Principal Occupation Lawyer Contributor's Principal Occupation Lawyer Contributor's employer/law firm Baker Botts Date 10/04/2024 Full name of contributor Kwok, Robert Contributor's address; City; State; Zip Code Houston, TX 77042 Contributor's Principal Occupation Attorney Contributor's pob Title Attorney Law firm of contributor's spouse (if any) Amount of Contribution (\$) \$5,000.00		10/22/2024	Kroger, Bill						\$250.00	
Contributor's Principal Occupation Lawyer Contributor's Principal Occupation Lawyer Contributor's employer/law firm Baker Botts Date 10/04/2024 Full name of contributor Kwok, Robert Contributor's address; City; State; Zip Code Houston, TX 77042 Contributor's Principal Occupation Attorney Contributor's pob Title Attorney Law firm of contributor's spouse (if any) Amount of Contribution (\$) \$5,000.00				State: Zip Code		1				
Contributor's Principal Occupation Lawyer Contributor's employer/law firm Baker Botts If contributor is a child, law firm of parent(s) (if any) Date 10/04/2024 Full name of contributor out-of-state PAC (ID#:			,							
Contributor's Principal Occupation Lawyer Contributor's employer/law firm Baker Botts If contributor is a child, law firm of parent(s) (if any) Date 10/04/2024 Full name of contributor out-of-state PAC (ID#:										
Contributor's Principal Occupation Lawyer Contributor's employer/law firm Baker Botts If contributor is a child, law firm of parent(s) (if any) Date 10/04/2024 Full name of contributor out-of-state PAC (ID#:			Houston, TX 77024							
Lawyer Contributor's employer/law firm Baker Botts If contributor is a child, law firm of parent(s) (if any) Date 10/04/2024 Contributor address; City; State; Zip Code Houston, TX 77042 Contributor's Principal Occupation Attorney Contributor's employer/law firm Kwok Daniel LLP Partner Law firm of contributor's spouse (if any) Amount of Contribution (\$) \$5,000.00 Amount of Contribution (\$) \$5,000.00 Contributor's Job Title Attorney Law firm of contributor's spouse (if any) Law firm of contributor's spouse (if any)	_	Contributor's I	l		Contributor's 1oh Title					
Contributor's employer/law firm Baker Botts If contributor is a child, law firm of parent(s) (if any) Date 10/04/2024 Kwok, Robert Contributor address; City; State; Zip Code Houston, TX 77042 Contributor's Principal Occupation Attorney Contributor's employer/law firm Kwok Daniel LLP Law firm of contributor's spouse (if any) Martin, Disiere, Jefferson, & Wisdom Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:			тиора Оссараноп							
Baker Botts If contributor is a child, law firm of parent(s) (if any) Date			emplover/law firm			nous	se (if any)			
If contributor is a child, law firm of parent(s) (if any) Date			employer/law mm					า		
Date 10/04/2024 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	_		s a child law firm of parent(s) (if any)	Martin, Bioloro, Conord			·		
10/04/2024 Kwok, Robert \$5,000.00 Contributor address; City; State; Zip Code Houston, TX 77042 Contributor's Principal Occupation Contributor's Job Title Attorney Attorney Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Kwok Daniel LLP		ii contributor i	s a crima, raw iirii or parcrii(s) (ii diriy)						
Contributor address; City; State; Zip Code Houston, TX 77042 Contributor's Principal Occupation Attorney Contributor's employer/law firm Kwok Daniel LLP Contributor's state; Zip Code Contributor's Job Title Attorney Law firm of contributor's spouse (if any)		Date	Full name of contributor	out-of-state PAC (ID#:)		Amount o	of Contribution (\$)		
Houston, TX 77042 Contributor's Principal Occupation Attorney Contributor's Job Title Attorney Contributor's employer/law firm Kwok Daniel LLP Law firm of contributor's spouse (if any)		10/04/2024	Kwok, Robert						\$5,000.00	
Contributor's Principal Occupation Attorney Contributor's employer/law firm Kwok Daniel LLP Contributor's employer/law firm Contributor's spouse (if any)			Contributor address; City;	State; Zip Code		"				
Contributor's Principal Occupation Attorney Contributor's employer/law firm Kwok Daniel LLP Contributor's employer/law firm Contributor's spouse (if any)										
Attorney Contributor's employer/law firm Kwok Daniel LLP Attorney Law firm of contributor's spouse (if any)			Houston, TX 77042							
Contributor's employer/law firm Kwok Daniel LLP Law firm of contributor's spouse (if any)		Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>				
Kwok Daniel LLP		Attorney			Attorney					
		Contributor's	employer/law firm		Law firm of contributor's s	pous	se (if any)			
If contributor is a child, law firm of parent(s) (if any)		Kwok Danie	ILLP							
		If contributor i	s a child, law firm of parent(s) (if any)	1					

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 8/16 Rpt: 11/35
2	FILER NAME Gomez, Micl	nael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4	Date 10/22/2024	5 Full name of contributor Landers, Daniella6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$100.00
		Houston, TX 77002				
8		Principal Occupation		9 Contributor's Job Title		
	Reed Smith			Partner		
10	Contributor's of Womble Dic	employer/law firm kinson LLP		11 Law firm of contributor's sp	ou	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/17/2024 Lane, Robert Contributor address; City; State; Zip Code Houston, TX 77036			•	\$250.00	
	O a materilla cata and a 1			Occasionate de Joh Tide		
	Attorney	Principal Occupation		Contributor's Job Title Managing Partner		
		employer/law firm		Law firm of contributor's sp	2011	co (if amy)
	The Lane La			Law IIIII of Contributor 5 3	Jou.	se (ii aiiy)
		s a child, law firm of parent(s) (if	anv)			
	oonanaata	o a oa, ian o. paron(o) (i	٠			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)
	10/24/2024	Lesley Briones Campaig	n			\$500.00
		Contributor address; City; S Houston, TX 77008	state; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Commission	er		Commissioner		
		employer/law firm		Law firm of contributor's sp	ou	se (if any)
	Harris Count	ty				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS			SCHEDULE /	A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1		es Schedule A(J)1 6 Rpt: 12/35	:
2	FILER NAME				3	Filer ID	(Ethics Commission	on Filers)
	Gomez, Mic	hael Paul (The Honorable)				0006232	22	
4	Date 10/21/2024	5 Full name of contributor Lipford, Nelsy6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount o	f Contribution (\$)	\$250.00
		Houston, TX 77009						
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
	Deputy Gen	eral Counsel		Deputy General Couns	el			
10	Contributor's ConocoPhill	employer/law firm ips		11 Law firm of contributor's s	pou	se (if any)		
12	! If contributor i	s a child, law firm of parent(s) (i	f any)	L				
-	Date	Full name of contributor	D out of state BAC (ID#:		Т	Amount o	of Contribution (\$)	
	10/22/2024	Molina, Rick	out-of-state PAC (ID#:)		Amount	ii Continbution (\$)	\$500.00
	10/22/2024	Contributor address; City;	04-4 7'- 0-4-		.			Ψ300.00
		Houston, TX 77034						
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Attorney			Managing Attorney				
		employer/law firm		Law firm of contributor's s	pou	se (if any)		
	Molina Law	Firm						
	If contributor i	s a child, law firm of parent(s) (i	f any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount o	of Contribution (\$)	
	10/22/2024	Monty & Ramirez LLP	_					\$500.00
		Contributor address; City;	State; Zip Code					
		Houston, TX 77076						
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>			
	Contributor's	employer/law firm		Law firm of contributor's s	pou	se (if any)		
	If contributor i	s a child, law firm of parent(s) (i	f any)	I				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS			SCHEDULE A	A(J)1
	The Instru	ction Guide explains ho	ow to complete this f	form.	1		es Schedule A(J)1 16 Rpt: 13/35	:
2	FILER NAME				3	Filer ID	(Ethics Commission	n Filers)
	Gomez, Mic	hael Paul (The Honorable)				0006232	2	
4	Date 10/16/2024	Full name of contributor Muller, MatthewContributor address; City;	out-of-state PAC (ID#:_)	7	Amount o	f Contribution (\$)	\$500.00
		houston, TX 77007		,				
8	Contributor's	Principal Occupation		9 Contributor's Job Title				
	Attorney			Founding Attorney				
10	Contributor's Matt Muller I	employer/law firm PC		11 Law firm of contributor's s	pous	se (if any)		
12	! If contributor i	s a child, law firm of parent(s) (i	if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount o	f Contribution (\$)	
	10/23/2024	Mundy, Dennis	United State 1 AC (ID#.			7 tinodni o	r Continbution (Φ)	\$500.00
	10/20/2021	Contributor address; City;	Stato: 7in Codo					Ψ000.00
		Tomball, TX 77375						
	Contributor's	Principal Occupation		Contributor's Job Title				
	Attorney			Owner				
		employer/law firm		Law firm of contributor's s	pou	se (if any)		
	Mundy & As	sociate, PLLC						
	If contributor i	s a child, law firm of parent(s) (i	if any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount o	f Contribution (\$)	
	10/10/2024	Musslewhite, Jeff	_					\$250.00
		Contributor address; City;	State; Zip Code					
		Houston, TX 77027		•				
		Principal Occupation		Contributor's Job Title				
	Attorney			Partner				
		employer/law firm		Law firm of contributor's s	pou	se (if any)		
		sslewhite LLP						
	If contributor i	s a child, law firm of parent(s) (i	if any)					

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS		SCHEDULE A(J)1	
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 11/16 Rpt: 14/35	=
2	FILER NAME Gomez, Micl	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322	
4 Date 10/01/2024 5 Full name of contributor out-of-state PAC (ID#:			7	Amount of Contribution (\$) \$100.0	– Э		
		Houston, TX 77095					
8		Principal Occupation		9 Contributor's Job Title			
_	Retired			Retired			_
10	Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)	
12	2 If contributor is	s a child, law firm of parent(s) (if	any)	l			_
_	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	=
	10/23/2024	Norton Rose Fulbright US Contributor address; City; S		e		\$1,500.0	C
		Houston, TX 77010		T			_
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)	_
	If contributor is	s a child, law firm of parent(s) (if	any)				_
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	=
	10/15/2024	Sorrels, Randall	_			\$1,000.0	0
		Contributor address; City; S Houston, TX 77007	itate; Zip Code				
	Contributor's I	Principal Occupation		Contributor's Job Title	_		_
	Attorney			Partner			
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	Sorrels Law			Sorrels Law			
	If contributor is	s a child, law firm of parent(s) (if	any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 12/16 Rpt: 15/35
2	FILER NAME Gomez, Mic	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4 Date 5 Full name of contributor out-of-state PAC (ID#:_ 10/16/2024 Spagnoletti, Marcus 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$) \$5,000.00		
		Houston, TX 77002				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Founding Attorney		
10	Contributor's of Spagnoletti I	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12		s a child, law firm of parent(s) (i	f any)			
		o a orma, raw mm or parom(o) (r				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/16/2024	Stewart, Jarod Contributor address; City;	State; Zip Code			\$1,000.00
	Contributor's I	Houston, TX 77002 Principal Occupation		Contributor's Job Title		
	Attorney	iniopai Goodpaion		Partner		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Steptoe					
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/08/2024	Stogner, Brant	_			\$1,500.00
		Contributor address; City;	State; Zip Code			
	Contributorio	Houston, TX 77042		Contributorio Joh Titlo		
	Trial Attorne	Principal Occupation V		Contributor's Job Title Partner		
		employer/law firm		Law firm of contributor's sp	oous	e (if anv)
		atkins Nichols Agosto Aziz &	Stogner			- (),
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL CONTRIBU	TIONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete tl		pages Schedule A(J)1: 13/16 Rpt: 16/35	
2	FILER NAME			3 Filer I	D (Ethics Commission Filers)
	Gomez, Mic	hael Paul (The Honorable)		0006	2322
4 Date 10/22/2024 5 Full name of contributor out-of-state PAC (ID#: The Del Pozo Family Community Fund 6 Contributor address; City; State; Zip Code		(ID#:	7 Amou	int of Contribution (\$) \$500.00	
		Friendswood, TX 77546			
8	Contributor's	I Principal Occupation	9 Contributor's Job	Title	
10	Contributor's	employer/law firm	11 Law firm of contri	butor's spouse (if ar	חיץ)
12	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor	(ID#:) Amou	unt of Contribution (\$)
	10/25/2024	The Feldman Law Firm LLP	(10#		\$250.00
		Contributor address; City; State; Zip Code			
	-	Houston, TX 77056			
	Contributor's	Principal Occupation	Contributor's Job	Title	
	Contributor's	employer/law firm	Law firm of contri	butor's spouse (if ar	ny)
	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor out-of-state PAC	(ID#:) Amou	int of Contribution (\$)
	10/22/2024	The Hall Law Group, PLLC Operating Acco			\$1,000.00
		Contributor address; City; State; Zip Code			
	0	Houston, TX 77006			
	Contributor's	Principal Occupation	Contributor's Job	Litle	
	Contributor's	employer/law firm	Law firm of contri	butor's spouse (if ar	ny)
	If contributor i	s a child, law firm of parent(s) (if any)	I		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1	ges Schedule A(J): /16 Rpt: 17/35	L:
2	FILER NAME				3 Filer ID	(Ethics Commissi	on Filers)
	Gomez, Micl	hael Paul (The Honorable)			0006232	22	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7 Amount o	of Contribution (\$)	
	10/22/2024	The Kruckemeyer Law Fir	—			,	\$300.00
		6 Contributor address; City; Sta	ate; Zip Code				
		Houston, TX 77002					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if a	ny)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	10/22/2024	The Law Offices of Jose R	 R. Lopez, II				\$500.00
		Contributor address; City; Sta	ate; Zip Code				
		Houston, TX 77007					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	ny)				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount o	of Contribution (\$)	
	10/22/2024	Thompson, Coe, Cousins	 & Irons, LLP				\$1,000.00
		Contributor address; City; Sta	ate; Zip Code				
		Dallas, TX 75201					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	ny)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 15/16 Rpt: 18/35
2	FILER NAME Gomez, Mic	hael Paul (The Honorable)			3	Filer ID (Ethics Commission Filers) 00062322
4 Date 10/22/2024 5 Full name of contributor out-of-state PAC (ID#:_ Tilton, Michael 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$) \$250.00		
		Houston, TX 77098				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Founding Partner		
10	Contributor's e Tilton & Tilto	employer/law firm n LLP		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	10/22/2024	Williger, Tarin Contributor address; City;	State; Zip Code			\$350.00
		Houston, TX 77092				
		Principal Occupation		Contributor's Job Title		
	President			President		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	QCI, LLC	a a shild law firm of narant(a) (i	f any)			
	ii contributor i	s a child, law firm of parent(s) (i	rany)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	10/18/2024	Zar, Matthew				\$500.00
		Contributor address; City; Houston, TX 77027	State; Zip Code			
_	Contributor's F	Principal Occupation		Contributor's Job Title		
	Attorney	molpai Goddpailon		Founding Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Zar Law Firn	n				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE A(J)1
	The Instru	ges Schedule A(J)1: 5/16 Rpt: 19/35			
2	FILER NAME			3 Filer ID	(Ethics Commission Filers)
	Gomez, Micl	hael Paul (The Honorable)		000623	22
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount	of Contribution (\$)
	10/14/2024	Zimmerman, Alvin			\$250.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77056			
8	Contributor's F	Principal Occupation	9 Contributor's Job Title	-	
	Attorney		Of Counsel		
10		employer/law firm	11 Law firm of contributor's sp	oouse (if any)	
	Spencer Far	ne LLP s a child, law firm of parent(s) (if any)			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total manua Cabadula E1.	2 Files ID (Ethics Commission Files)	_
1	Total pages Schedule F1: Sch: 1/11 Rpt: 20/35	2 FILER NAME Gomez, Michael Paul (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062322	
4	Date	5 Payee name	
	10/04/2024	ActBlue	
6	Amount (\$) \$406.50	7 Payee address; City; State; Zip Code 366 Summer Street Sommerville, MA 02144	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Fees Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense Online Contribution Fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/19/2024	Acves Communications	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00	2909 Baldwin St	
		Houston, TX 77006	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Political Consulting	
		Political Consulting	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	10/19/2024	Allied Printing Services	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$243.56	14915 Stuebner Airlines Rd	
		Suite I	
		Houston, TX 77069	
	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	
		Campaign T-shirts [pd to A Comm]	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		

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		
Ļ	T.1		_
1	Total pages Schedule F1: Sch: 2/11 Rpt: 21/35	2 FILER NAME Gomez, Michael Paul (The Honorable) 3 Filer ID (Ethics Commission Filers) 00062322	
4	Date	5 Payee name	_
	10/19/2024	Campaign Warriors	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$3,000.00	14237 E. Sam Houston Parkway N.	
		Suite 200	
		Houston, TX 77044	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Campaign poll work	
		Campaign poil work	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	_
			_
	Date	Payee name	
	10/10/2024	Chase Credit Card (M)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$346.81	P.O. Box 15123	
		Wilmington, DE 19850-5123	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit Card Payment of Sch F4 expenditure (8/4	
		Vons)	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	=
	10/10/2024	Chase Credit Card (M)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$448.40	P.O. Box 15123	
		Wilmington, DE 19850-5123	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel systems of Taxas, Complete Schedule T	
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Credit Card Payment of Sch F4 expenditure (8/5	
		Steak 48)	
	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)

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

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

g Expense Travel in D
ng Expense Travel Out
es/Wages/Contract Labor OTHER (e

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/11 Rpt: 22/35	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	10/10/2024	Chase Credit Card (M)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$463.75	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card Payment of Sch F4 expenditure (8/15
		Morton's)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
T	Date	Payee name
	10/10/2024	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.44	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Credit Card Payment of Sch F4 expenditure (7/10
		Constant Contact)
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Payee name
	10/10/2024	Chase Credit Card (SWP)
\vdash	Amount (\$)	Payee address; City; State; Zip Code
	\$55.44	P.O. Box 15123
	Ψ55.44	1.0. box 13123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (8/10 Constant Contact)
	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	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 4/11 Rpt: 23/35	Gomez, Michael Paul (The Honorable) Gomez, Michael Paul (The Honorable)
4	Date	5 Payee name
	10/10/2024	Chase Credit Card (SWP)
6	Amount (\$) \$55.44	7 Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (9/10 Constant Contact)
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/10/2024	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,695.20	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (8/7
		Four Seasons)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/10/2024	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$552.96	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxes, Complete Schedule T
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (7/12
		Southwest)
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made 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		rel Out of District IER (enter a category not listed above)
1	Total pages Schedule F1:	. I 2 FILED NAME	r ID (Ethics Commission Filers)
1	Sch: 5/11 Rpt: 24/35		r ID (Ethics Commission Filers) 062322
4	Date	5 Payee name	
	10/10/2024	Chase Credit Card (SWP)	
6	Amount (\$) \$199.00	7 Payee address; City; State; Zip Code P.O. Box 15123 Wilmington, DE 19850-5123	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, office	
			nt of Sch F4 expenditure (7/16
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	10/10/2024	Chase Credit Card (SWP)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$504.90	P.O. Box 15123	
		Wilmington, DE 19850-5123	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	orealt early rayment	Texas. Complete Schedule T.
		Credit Cord Rowses	
		Edelweiss)	nt of Sch F4 expenditure (8/4
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	10/10/2024	Chase Credit Card (SWP)	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,149.22	P.O. Box 15123	
		Wilmington, DE 19850-5123	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	,	Texas. Complete Schedule T.
	EXPENDITURE	Credit Card Payment Check if Austin, TX, office	·
		· · · · · · · · · · · · · · · · · · ·	nt of Sch F4 expenditure (8/7
		National)	,
_	Complete ONLY if direct	Candidate/Officeholder name	Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/\	Vages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission Filers)
	Sch: 6/11 Rpt: 25/35		chael Paul (The Hoi	norable)				00062322	,
4	Date	5 Payee name							
	10/10/2024	Chase Cre	dit Card (SWP)						
6	Amount (\$) \$500.00	Payee addre		State; Zip Co	ode				
8	PURPOSE	(a) Category (S	ee Categories listed at the to	p of this schedule)	(b)	Description			
	OF EXPENDITURE	Credit Card		,		Check if travel	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE					_	ay		F4 expenditure (8/12
9	Complete ONLY if direct expenditure to benefit C/ON		iceholder name	Office sou	ught			Office he	eld
	Date	Payee name							
	10/10/2024	Chase Cre	dit Card (SWP)						
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode				
	\$170.46	P.O. Box 1	5123						
			, DE 19850-5123		lax				
	PURPOSE OF		ee Categories listed at the to	p of this schedule)	(b)	Description	otoi	de of Toyon Com	olata Cabadula T
	EXPENDITURE	Credit Card	l Payment					de of Texas. Com officeholder living	
						_			F4 expenditure (8/15
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ight			Office he	eld
	Date	Payee name							
	10/10/2024	Chase Cre	dit Card (SWP)						
	Amount (\$)	Payee addre		State; Zip Co	ode				
	\$500.00	P.O. Box 1	5123						
		_	, DE 19850-5123						
	PURPOSE OF	l .	ee Categories listed at the to	p of this schedule)	(b)	Description	otoi	de of Toyon Com	olata Cabadula T
	EXPENDITURE	Credit Card	l Payment					de of Texas. Com officeholder living	
						_	ay	ment of Sch	F4 expenditure (8/24
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ight			Office he	eld

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services			Vages	/Contract Labor		OTHER (enter a	a category not listed at	ove)
	<u> </u>			The Instruction (Guide explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commiss	ion Filers)
l	Sch: 7/11 Rpt: 26/35		Gomez, Mi	chael Paul (The	e Honorable))				00062322		
4	Date	5	Payee name	!								
l	10/10/2024			dit Card (SWP)								
ہا		-				. Zin Co	do					
ľ	Amount (\$)	'	Payee addre		State	; Zip Co	ue					
l	\$103.90		P.O. Box 1	5123								
l												
l			Wilmington	, DE 19850-51	23							
8	PURPOSE	(a)	Category (s	ee Categories listed a	the top of this sch	nedule)	(b)	Description				
l	OF		Credit Card		. 110 top of 1110 ooi	.ouu.o,			outsi	de of Texas. Con	nplete Schedule T.	
l	EXPENDITURE			,				Check if Austin,	, TX,	officeholder livin	g expense	
l									ay	ment of Sch	n F4 expenditur	e (8/27
l								Irma's)				
9	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ght			Office h	eld	
l	expenditure to benefit C/O	Н										
F	Date	Π	Payee name									
l	10/10/2024		•	dit Card (SWP)								
L		L										
l	Amount (\$)		Payee addre		State	; Zip Co	de					
l	\$83.00		P.O. Box 1	5123								
l												
l			Wilmington	, DE 19850-51	23							
H	PURPOSE	(a)	Category (s	see Categories listed a	t the ten of this sch	odulo)	(b)	Description				
l	OF	<u> `</u>	Credit Card		title top of tills scri	iedule)	ľ		outsi	de of Texas. Con	nplete Schedule T.	
l	EXPENDITURE		0.00.0	ayıa.ı				Check if Austin,	, TX,	officeholder livin	g expense	
l											n F4 expenditur	e (8/30
l								Houston Law	yer	s Association	on)	
Г	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ght			Office h	eld	
l	expenditure to benefit C/O	Н										
⊨	Date		Dayoo nama									
l	10/10/2024		Payee name	dit Card (SWP)								
┡												
l	Amount (\$)		Payee addre		State	; Zip Co	de					
l	\$1,000.00		P.O. Box 1	5123								
l												
l			Wilmington	, DE 19850-51	23							
┢	PURPOSE	(a)	Category (s	ee Categories listed a	t the ton of this sch	nedule)	(b)	Description				
l	OF	<u> </u> `	Credit Card		t the top of this son	icuaic)	` ´		outsi	de of Texas. Con	nplete Schedule T.	
l	EXPENDITURE		0.00.0	ayıa.ı				Check if Austin,	, TX,	officeholder livin	g expense	
l											n F4 expenditur	e (9/11
l								Precinct2geth	ner	Inc.)		
Г	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										
I												

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	Credit Card F dyment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/11 Rpt: 27/35	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	10/10/2024	Chase Credit Card (SWP)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (9/13
		Meyerland Area Dems)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/10/2024	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$203.28	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (9/14 Romas)
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	D-4-	
	Date	Payee name
	10/10/2024	Chase Credit Card (SWP)
	Amount (\$)	Payee address; City; State; Zip Code
	\$478.05	P.O. Box 15123
		Wilmington, DE 19850-5123
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORL	Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (9/18 Pinkerton's BBQ)
		, we have a second of the seco
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefit 6/01	•

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/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/11 Rpt: 28/35	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	10/10/2024	Chase Credit Card (SWP)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$562.69	P.O. Box 15123
		Wilmington, DE 19850-5123
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment of Sch F4 expenditure (9/25 El
		Tiempo)
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	10/01/2024	DonorBox
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.95	1520 Belle View Blvd.
		Suite 4106
		Alexandria, VA 22307
	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
		Online Contribution Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/27/2024	DonorBox
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.67	1520 Belle View Blvd.
		Suite 4106
		Alexandria, VA 22307
	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
		Online Contribution Fees
\vdash	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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

ent Solicitation/Fundraising Expense
se 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: 10/11 Rpt: 29/35	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	10/18/2024	Monarch Printing Company, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,315.24	6605 McGrew
		Houston, TX 77087
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Printing Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Push Cards
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/20/2024	Sanchez, Melissa
	Amount (\$)	Payee address; City; State; Zip Code
	\$850.00	11814 Dellfern Ct
		Houston, TX 77071
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		Sign placement for early voting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Data	
	Date	Payee name
	10/21/2024	Sprint2Print
	Amount (\$)	Payee address; City; State; Zip Code
	\$4,124.33	8748 Clay Rd, Suite 300
		Houston, TX 77080
	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
		Campaign signs
		Campaign oigno
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y

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	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: 11/11 Rpt: 30/35	Gomez, Michael Paul (The Honorable) 00062322
4	Date	5 Payee name
	10/04/2024	Stripe
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$596.45	354 Oyster Point Boulevard
l		
		San Francisco, CA 94080
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Online Contribution Fees
		Stilling Containment of the Cont
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/15/2024	Strong Strategies, LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	325 W. 18th St.
		Houston, TX 77008
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fundraising Consulting and Compliance
		Tanaraoning concurring and compilation
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
l		
l		
l		
Ц_		

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 1/4 Rpt: 31/35	Gomez, Michael Pa	aul (The Honorable)		00062322		
4 CREDIT CARD ISSUER		ncial institution e (SWP)	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 10/15/2024	(c) Date(s) Credit Card Issue 10/26/2024	er Paid		
7 PAYEE	(a) Payee name Bayou Blue Democ	rats	(b) Payee address; 2111 Welch Street Apt B312 Houston, TX 77019-5654	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Description Sponsor for GOTV drive			
Non-Political	(1)	of Texas. Complete Schedule T.		, officeholder living expe	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 \$2,786.87	(b) Date of Charge 10/22/2024	(c) Date(s) Credit Card Issue 10/26/2024	er Paid		
PAYEE	(a) Payee name Tony's		(b) Payee address; 9 Greenway Plaza 3755 Richmond Ave Houston, TX 77046	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Food and space for camp	paign fundraiser		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$336.84	(b) Date of Charge 10/24/2024	(c) Date(s) Credit Card Issue 10/26/2024	er Paid		
PAYEE	(a) Payee name Ubereats		(b) Payee address; 1455 Market St 400 San Francisco, CA 94103	City,	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Food/Beverage Expe	· ·	(b) Description Lunch for Harris County E	Ballot Board		
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expe	ense	
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 -

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

Candidate/Officeholder/Politica	-	ices Sal ruction Guide explains how	•	THER (enter a category	not listed ab	oove)
4. Tatal range Calculula E4.		Tuction Guide explains now	to complete this form.	C Eller ID (Ethior		: Fil\
1 Total pages Schedule F4:		1.7		3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 2/4 Rpt: 32/35	Gomez, Michael Pa		T	00062322		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	e e		
ISSUER	see pi	revious	CHARGED TO A CREDIT	. \$		
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$500.00	10/15/2024	10/26/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			3800 Spencer Highway			
	Area 5 Democrats		Suite L			
			Pasadena, TX 77504			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Sponsor for GOTV drive			
X Political	Advertising Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chook if Auctin TV	officeholder living expe	200	
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Office held	ise	
expenditure to benefit C/OH	Caralaate/Oniceriolaer	That Comes	2 Sought	Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
			10/26/2024			
	\$347.40	10/18/2024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	(a) I ayou hamo		9827 Katy Fwy	Oity,	Otato,	Zip Code
	Perry's		Jozi Raty I Wy			
			Houston, TX 77024			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Birthday lunch for staff			
X Political	Food/Beverage Expe	nse				
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		
	\$500.00	10/04/2024	10/26/2024			
	4000.00	10/0 1/2021				
PAYEE	(a) Payee name	<u>I</u>	(b) Payee address;	City,	State,	Zip Code
	, , ,		PO Box 925631			
	Sister's United Allia	nce				
			Houston, TX 77292			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Sponsor for GOTV progra	am		
X Political	Advertising Expense					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chack if Austin TV	officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held	136	
expenditure to benefit C/OH	Sa. a. aato, Sillotholder	Office		550 Hold		
The state of the s						
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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District
OTHER (enter a category not listed above)

		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: 3/4 Rpt: 33/35	Gomez, Michael Pa	aul (The Honorable)			00062322		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$55.44	(b) Date of Charge 10/10/2024	10/26/20		Paid		
7	PAYEE	(a) Payee name Constant Contact		Waltham	Place pelo Road , MA 02451	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descri	otion mail communicati	ons tool		
	Non-Political	· · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 10/15/2024	(c) Date(s) 10/26/20) Credit Card Issuer 124	Paid		
	PAYEE	(a) Payee name Houston Black Ame	erican	(b) Payee P.O. Box Houston		City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Advertising Expense	of this schedule)	(b) Descri				
	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 \$5,001.06	(b) Date of Charge 10/15/2024	(c) Date(s)) Credit Card Issuei 124	Paid		
	PAYEE	(a) Payee name Texas Association (of District	(b) Payee 201 Card 10th Floo Houston	oline	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Fees	of this schedule)	(b) Descrip Lifetime	otion membership dues	6		
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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	y - Gift/Award:	s/Memorials Expense	Printing Expense T	ravel in District ravel Out of District DTHER (enter a category not liste	d above)
		The Inst	ruction Guide explains ho	ow to complete this form.		
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comn	nission Filers)
	Sch: 4/4 Rpt: 34/35	Gomez, Michael Pa	ul (The Honorable)		00062322	
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZED		
	ISSUER	Chas	se (M)	EXPENDITURES CHARGED TO A CREDIT	_ \$	
L				CARD		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid	
		\$10,000.00	10/25/2024	10/26/2024		
7	PAYEE	(a) Payee name		(b) Payee address;	City, State	e, Zip Code
		Harris County Dem	ocratic Party	4619 Lyons Ave		
		Tiams County Beni	ocidio i dity			
Ļ		(a) Oatawari		Houston, TX 77020		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Harris County Democrati	c Party Coordinated	
		Contributions/Donatio	ns Made By	Campaign	c Party Coordinated	
	X Political	Candidate/Officeholde		e		
Ļ	Non-Political	(1)	of Texas. Complete Schedule 1		C, officeholder living expense	
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Oi	fice sought	Office held	
	tperioritare to benefit C/OTT					
l						

	Day of The Reporting Period		SCHEDULE M
The Instruction Guide e	explains how to complete this form.	1 Total pages Sch: 1/1 Rp	
2 FILER NAME Gomez, Michael Paul (The Honora	ıble)	3 Filer ID 00062322	(Ethics Commission Filers)
Description of Asset Dell XPS 16		I	
20			