

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00040542	<b>2</b> Total pages filed: 26		
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Trey	MI MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 10/28/2024	
	NICKNAME LAST Martinez Fischer	SUFFIX SUFFIX			
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 104 Babcock Road Ste. 107 San Antonio, TX 78201		ZIP CODE	Date Hand-delivered or Date Postmarked  Receipt #                      Amount  Date Processed  Date Imaged	
	MS / MRS / MR Dr.		FIRST Joe	MI MI	
	NICKNAME LAST Bernal		SUFFIX SUFFIX		
	STREET ADDRESS (NO PO BOX PLEASE);                      APT / SUITE #;                      CITY;                      STATE;                      ZIP CODE 6410 Laurelhill Dr.  San Antonio, TX 78229-4835				
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE (210)	PHONE NUMBER 342-2182	EXTENSION		
<b>8</b> REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
<b>9</b> PERIOD COVERED	Month    Day    Year 09/27/2024		THROUGH	Month    Day    Year 10/26/2024	
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 11/05/2024		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
<b>11</b> OFFICE	OFFICE HELD (if any) State Representative District 116 Bexar		<b>12</b> OFFICE SOUGHT (if known) State Representative District 116		

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 26

**13 C / OH NAME** Martinez Fischer, Trey (The Honorable) **14 Filer ID** (Ethics Commission Filers)  
00040542

**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	91,690.84
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	29,245.11
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	430,694.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFIDAVIT**

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Trey Martinez Fischer  
\_\_\_\_\_  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

\_\_\_\_\_  
Signature of officer administering      Printed name of officer administering      Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

3 of 26

<b>18 FILER NAME</b> Martinez Fischer, Trey (The Honorable)	<b>19 Filer ID</b> (Ethics Commission Filers) 00040542
--	---

<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 91,017.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 673.84
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 750.00
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 28,495.11
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/26
2 FILER NAME Martinez Fischer, Trey (The Honorable)		3 Filer ID (Ethics Commission Filers) 00040542
4 Date 10/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) AT&T Texas PAC	7 Amount of Contribution (\$) \$2,000.00
	6 Contributor address; City; State; Zip Code  Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00040279</u> ) Abbott Laboratories Employee PAC	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code  Abbot Park, IL 60064-6001	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Allen, Boone, Humphries, Robinson, LLP	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Houston, TX 77027	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) American Pharmacy, Inc. GPAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Corpus Christi, TX 78401	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Autry Public Affairs	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/11 Rpt: 5/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/18/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ben E. Keith PAC <hr/> <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76102	<b>7</b> Amount of Contribution (\$)  \$1,500.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Border Health PAC <hr/> Contributor address; City; State; Zip Code  McAllen, TX 78504	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Brentwood Public Affairs <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Bresnen, Steve <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) Lobbyist
Date 09/27/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00035006 ) CE PAC <hr/> Contributor address; City; State; Zip Code  San Ramon, CA 94583	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/11 Rpt: 6/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Castillo, Evelyn <hr/> <b>6</b> Contributor address; City; State; Zip Code  McAllen, TX 77004	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Lobbyist		<b>9</b> Employer (See Instructions) Pathfinder Public Affairs
<b>Date</b> 10/22/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Charter Communications, Inc. Texas PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  San Antonio, TX 78701	<b>Amount of Contribution (\$)</b>  \$2,500.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/08/2024	<b>Full name of contributor</b> <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00248716 ) Comcast Corporation & NBCUNIVERSAL PAC <hr/> <b>Contributor address; City; State; Zip Code</b>  Philadelphia, PA 19103	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/08/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cullen, Ann <hr/> <b>Contributor address; City; State; Zip Code</b>  Victoria, TX 77902	<b>Amount of Contribution (\$)</b>  \$6,250.00
<b>Principal occupation / Job title (See Instructions)</b> Self		<b>Employer (See Instructions)</b> L&F Distributors
<b>Date</b> 10/15/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Curbow, Kelly <hr/> <b>Contributor address; City; State; Zip Code</b>  San Marcos, TX 76666	<b>Amount of Contribution (\$)</b>  \$1,000.00
<b>Principal occupation / Job title (See Instructions)</b> Lobbyist		<b>Employer (See Instructions)</b> AT&T

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/11 Rpt: 7/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 09/28/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Einstein, Edwin <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78230	<b>7</b> Amount of Contribution (\$)  \$10.00
<b>8</b> Principal occupation / Job title (See Instructions) attorney		<b>9</b> Employer (See Instructions) self
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00219642</u> ) Enterprise Holdings PAC <hr/> Contributor address; City; State; Zip Code  St. Louis, MO 63105	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Garcia, David (Mr.) <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self employed
Date 10/15/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00199257</u> ) Genen PAC <hr/> Contributor address; City; State; Zip Code  San Francisco, CA 94080	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C00027342</u> ) IBEW PAC <hr/> Contributor address; City; State; Zip Code  Washington, DC 20001	Amount of Contribution (\$)  \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/11 Rpt: 8/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Keffer Konsulting <hr/> <b>6</b> Contributor address; City; State; Zip Code  Eastland, TX 76448	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Kelley, Russell T. (Mr.) <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$10,000.00
Principal occupation / Job title (See Instructions) lobbyist		Employer (See Instructions) Blackridge
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) La Mantia Jr., Greg (Mr.) <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75244	Amount of Contribution (\$)  \$6,250.00
Principal occupation / Job title (See Instructions) Self		Employer (See Instructions) L&F Distributing
Date 10/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) LaMantia , Lauren (Ms.) <hr/> Contributor address; City; State; Zip Code  Boerne, TX 78015	Amount of Contribution (\$)  \$6,250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Guerra Law Firm
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Law Office Craig Eiland <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/11 Rpt: 9/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/15/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Law Pac	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00496307 ) Marathon Oil Company PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Findlay, OH 45840		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Meyers, Lucas	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Austin, TX 78759		
Principal occupation / Job title (See Instructions) governmental affairs consultant		Employer (See Instructions) governmental affairs llc
Date 09/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Montez Felder, Debra	Amount of Contribution (\$) \$7.00
Contributor address; City; State; Zip Code  San Antonio, TX 78253		
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 10/22/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Perdue, Brandon, Fielder, Collina & Mott, LLP	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Lubbock, TX 79408-0817		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/11 Rpt: 10/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Piesen, Lisa <hr/> <b>6</b> Contributor address; City; State; Zip Code  El Paso, TX 79922	<b>7</b> Amount of Contribution (\$)  \$6,250.00
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed		<b>9</b> Employer (See Instructions) L&F Distributors
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Poinsett PLLC <hr/> Contributor address; City; State; Zip Code  Austin, TX 78701	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Lupita <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78539	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Pathfinder Public Affairs
Date 10/16/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramirez, Rene <hr/> Contributor address; City; State; Zip Code  Edinburg, TX 78539	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Richie, Carl <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78239	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions) none

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/26
2 FILER NAME Martinez Fischer, Trey (The Honorable)		3 Filer ID (Ethics Commission Filers) 00040542
4 Date 10/17/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez Jr., Fidel	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code  San Antonio Tx, TX 78212	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Rodriguez Trial Law
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ron Lewis & Associates	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00341602) Southwest Airlines PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code  Dallas, TX 75235	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXCPA PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Dallas, TX 75254	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TXTA Truck PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Austin, TX 75701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/11 Rpt: 12/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/05/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Association of Pawn Brokers PAC	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/08/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Dairymen PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78711		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Society of Architects	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code  Austin, TX 78702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Trial Lawyers Association PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Texas Trial Lawyers Association PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/11 Rpt: 13/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/04/2024	<b>5</b> Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00284885 ) The Home Depot PAC	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>6</b> Contributor address; City; State; Zip Code  Washington , DC 20004		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 10/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Townsend, Trent	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78703		
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Imperium Public Affairs
Date 09/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Valdez, Jerry	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Austin, TX 78711		
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) self
Date 10/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) WholeSale Beer Distributors of Texas PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Williams, Thomas	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Navasota, TX 77868		
Principal occupation / Job title (See Instructions) Lobbyist		Employer (See Instructions) Self

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/11 Rpt: 14/26
<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/16/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Zarrabi, Saam <b>6</b> Contributor address; City; State; Zip Code  Irving, TX 75038	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>8</b> Principal occupation / Job title (See Instructions) Dentist		<b>9</b> Employer (See Instructions) Rodeo Dental

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/26	
2 FILER NAME Martinez Fischer, Trey (The Honorable)		3 Filer ID (Ethics Commission Filers) 00040542	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/16/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackridge	8 Amount of contribution (\$) \$673.84	9 In-kind contribution description Fundraising Host Expenses and Digital Advertising Expenses
	7 Contributor address; City; State; Zip Code  Austin, TX 78701	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
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 contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel in District                         |
| Contributions/ Donations Made By -         | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | OTHER (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 16/26	<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> Date 10/01/2024	<b>5</b> Payee name Gaudi Holdings LLC	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 104 Babcock  San Antonio, TX 78201	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Office Rent
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held



# EXPENDITURES MADE BY CREDIT CARD

**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 Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 1/10 Rpt: 17/26	<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542
<b>4</b> CREDIT CARD ISSUER	Name of financial institution American Express		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b> PAYMENT	(a) Amount Charged \$17.07	(b) Date of Charge 09/29/2024	(c) Date(s) Credit Card Issuer Paid
<b>7</b> PAYEE	(a) Payee name Zoom	(b) Payee address; City, State, Zip Code 55 Almaden Boulevard San Jose, CA 95113	
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly Service Charge
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
<b>PAYMENT</b>	(a) Amount Charged \$351.52	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name JW Marriott	(b) Payee address; City, State, Zip Code 110 E. 2nd St Austin, TX 78701	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Lodging for Austin meetings
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
<b>PAYMENT</b>	(a) Amount Charged \$153.50	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid
<b>PAYEE</b>	(a) Payee name Google	(b) Payee address; City, State, Zip Code 1600 Amphitheatre Parkway Mountainview, CA 94043	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description G-Suite Monthly Service Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

# EXPENDITURES MADE BY CREDIT CARD

**SCHEDULE F4**

**EXPENDITURE CATEGORIES FOR BOX 10(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 2/10 Rpt: 18/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$45.00	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Authorize.Net		(b) Payee address; City, State, Zip Code P.O. Box 8999 San Francisco, CA 94128-8999	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Online Fundraising Service Charge	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$17.28	(b) Date of Charge 10/02/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Twitter		(b) Payee address; City, State, Zip Code 1355 Market Square San Francisco, CA 94103	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly Service Charge	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$5,000.00	(b) Date of Charge 10/02/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Laurel Swift Campaign		(b) Payee address; City, State, Zip Code PO Box 6866 San Antonio, TX 78209	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Campaign Contribution	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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 Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 3/10 Rpt: 19/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$5,000.00	(b) Date of Charge 10/02/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Solomon Ortiz Campaign		(b) Payee address; City, State, Zip Code PO Box 286  Corpus Christi, TX 78403	
<b>8</b>	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Campaign Contribution	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$36.39	(b) Date of Charge 10/05/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Domino's Pizza		(b) Payee address; City, State, Zip Code 129 Bandera Rd  San Antonio, TX 78201	
<b>8</b>	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Food/Beverage Expense		(b) Description Lunch for volunteers	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$2,500.00	(b) Date of Charge 10/19/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Eddie Morales Campaign		(b) Payee address; City, State, Zip Code 352 Hillcrest Blvd.  Eagle Pass, TX 78852	
<b>8</b>	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Campaign Contribution	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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 Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 4/10 Rpt: 20/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$316.75	(b) Date of Charge 10/11/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name HEB		(b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd.  San Antonio, TX 78201	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food and Beverages for Campaign Office and Volunteers	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$204.57	(b) Date of Charge 10/08/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Amazon.com		(b) Payee address; City, State, Zip Code 410 Terry Avenue N  Seattle, WA 98109	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office Supplies for Campaign Office	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$12.78	(b) Date of Charge 10/13/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name DropBox		(b) Payee address; City, State, Zip Code 333 Brannan St.  San Francisco, CA 94107	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly Service Fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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 Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 5/10 Rpt: 21/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$165.29	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Hertz		(b) Payee address; City, State, Zip Code 9559 Airport Blvd San Antonio, TX 78216	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Rental Car for Campaign trip to South Texas	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$42.14	(b) Date of Charge 10/18/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name HEB GAS		(b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd San Antonio, TX 78201	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Fuel for Rental Vehicle	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$10,000.00	(b) Date of Charge 10/18/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Jonathan Gracia Campaign		(b) Payee address; City, State, Zip Code 119 W. Van Buren Harlingen, TX 78550	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Campaign Contribution	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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 Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 6/10 Rpt: 22/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 10/21/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Apollo Artistry		(b) Payee address; City, State, Zip Code 1165 N. Clark St., # 700 Chicago, IL 60610	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Monthly Website Hosting Fee	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$135.30	(b) Date of Charge 10/21/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Amazon.com		(b) Payee address; City, State, Zip Code 410 Terry Avenue N Seattle, WA 98109	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Campaign Office Supplies	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$96.94	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Hill Country Springs		(b) Payee address; City, State, Zip Code 10019 S IH35 Austin, TX 78747	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Water Service Charges for Capitol Office	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

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 Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 7/10 Rpt: 23/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$41.12	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Apollo Artistry		(b) Payee address; City, State, Zip Code 1165 N. Clark St., # 700  Chicago, IL 60610	
<b>8</b>	PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Graphic Design Monthly Service Charge	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$118.33	(b) Date of Charge 10/05/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Crystals Cafe		(b) Payee address; City, State, Zip Code 2420 N. Zarzamora St  San Antonio, TX 78201	
<b>8</b>	PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Breakfast for Campaign Volunteers	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$41.15	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Full Goods Diner		(b) Payee address; City, State, Zip Code 200 E. Grayson  San Antonio, TX 78215	
<b>8</b>	PURPOSE OF EXPENDITURE  <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Lunch with Colleague	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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 Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F4: Sch: 8/10 Rpt: 24/26		<b>2</b> FILER NAME Martinez Fischer, Trey (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00040542	
<b>4</b> CREDIT CARD ISSUER		Name of financial institution see previous		<b>5</b> TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
<b>6</b> PAYMENT		(a) Amount Charged \$72.62	(b) Date of Charge 10/04/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b> PAYEE		(a) Payee name Carriqui		(b) Payee address; City, State, Zip Code 239 E. Grayson San Antonio, TX 78215	
<b>8</b> PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Fundraising Lunch	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$182.53	(b) Date of Charge 10/09/2024	(c) Date(s) Credit Card Issuer Paid	
<b>PAYEE</b>		(a) Payee name Liberty Bar		(b) Payee address; City, State, Zip Code 1111 South Alamo Street San Antonio, TX 78210	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Staff Luncheon	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
<b>PAYMENT</b>		(a) Amount Charged \$214.78	(b) Date of Charge 10/13/2024	(c) Date(s) Credit Card Issuer Paid	
<b>PAYEE</b>		(a) Payee name HEB		(b) Payee address; City, State, Zip Code 2118 Fredericksburg Rd. San Antonio, TX 78201	
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Snacks, Drinks, and Cleaning Supplies for District, Capitol and Campaign Offices	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	



# EXPENDITURES MADE BY CREDIT CARD

**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 Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 9/10 Rpt: 25/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$115.00	(b) Date of Charge 09/28/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Crystals Cafe		(b) Payee address; City, State, Zip Code 2420 N. Zarzamora St San Antonio, TX 78201	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Breakfast for Campaign Volunteers	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$2,735.31	(b) Date of Charge 10/21/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name JC Media		(b) Payee address; City, State, Zip Code 7113 San Pedro Ave #391 San Antonio, TX 78216	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description Campaign Sign Purchase	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>6</b>	PAYMENT	(a) Amount Charged \$59.79	(b) Date of Charge 10/11/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Liberty Bar		(b) Payee address; City, State, Zip Code 1111 South Alamo Street San Antonio, TX 78210	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Lunch meeting with Colleague	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b>	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

# EXPENDITURES MADE BY CREDIT CARD

# 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 Instruction Guide explains how to complete this form.

<b>1</b>	Total pages Schedule F4: Sch: 10/10 Rpt: 26/26	<b>2</b>	FILER NAME Martinez Fischer, Trey (The Honorable)	<b>3</b>	Filer ID (Ethics Commission Filers) 00040542
<b>4</b>	CREDIT CARD ISSUER	Name of financial institution see previous		<b>5</b>	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
<b>6</b>	PAYMENT	(a) Amount Charged \$170.72	(b) Date of Charge 10/03/2024	(c) Date(s) Credit Card Issuer Paid	
<b>7</b>	PAYEE	(a) Payee name Bistro 09		(b) Payee address; City, State, Zip Code 6106 Broadway Alamo Heights, TX 78209	
<b>8</b>	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Dinner with colleague	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
<b>9</b>	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
<b>PAYMENT</b>	(a) Amount Charged \$549.23	(b) Date of Charge 10/09/2024	(c) Date(s) Credit Card Issuer Paid		
<b>PAYEE</b>	(a) Payee name JC Media	(b) Payee address; City, State, Zip Code 7113 San Pedro Ave #391 San Antonio, TX 78216			
<b>PURPOSE OF EXPENDITURE</b> <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) T-shirt purchase		(b) Description Campaign T-Shirt Purchase		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	