#### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

#### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.          1       Filer ID       2       Total pages filed:						
			00087602			41
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
NAME		Elizabeth R.			Date Received	
					ELECTRONIC	
					01/15/2025	
	NICKNAME	LAST		SUFFIX	01/10/2020	
		Martinez				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Y;	ZIP CODE	Date Hand-delivered	l or Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 830353					
ADDRESS					Receipt #	Amount
Change of Address	San Antonio, TX 78283					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER		Alexander			IVII	
NAME		Alexanuel				
	NICKNAME	LAST			SUFFIX	
		Martinez				
6 CAMPAIGN	STREET ADDRESS (NO PC	BOX PLEASE);	AP'	T / SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER ADDRESS	P.O. Box 830353					
(Residence or Business)	San Antonio, TX 78283					
7 CAMPAIGN	AREA CODE PHON	NE NUMBER E	EXTENSION			
TREASURER PHONE	(210) 421-8609					
THOME						
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff		ampaign treasurer fficeholder only)
	July 15	8th day before		Exceeded modified	Final Report (A	
		Still day belore		reporting limit	Final Report (A	
	Manth Davi Vaar			Manth Dav	Veer	
9 PERIOD COVERED	Month Day Year 07/01/2024	ть	IROUGH	Month Day	Year	
	07/01/2024	16	IROUGH	12/31/202	4	
		i				
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
	11/05/2024	XG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	District Judge District 73rd	d Bexar			· · ·	
GO TO PAGE 2						
Forms provided by Te	xas Ethics Commission	www.et	hics.state.tx.u	S	Vers	sion V4.1.0.5dd2ace2

#### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 41

I

<b>13</b> C / OH NAME	Martinez, Elizabeth F		14 Filer ID 00087602	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	the candidate's or offic	committees to support the ceholder's knowledge or notice of such expenditures.	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		<b>\$</b> 0.00
				<b>\$</b> 35,737.67
EXPENDITURE	· · · · ·	PLEDGES, LOANS, OR GUARANTEES OF LOAN IZED POLITICAL EXPENDITURES	NS)	<b>•</b> 0.00
TOTALS				\$ 0.00
	4. TOTAL POLIT	ICAL EXPENDITURES		<b>\$</b> 11,251.67
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	LAST DAY OF THE	<b>\$</b> 42,450.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			<b>\$</b> 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.		
		Eliz	abeth R. Martinez	
		Signature o	of Candidate or Officeho	older
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to c	ertify which, witness my hand and seal of office.		
Signature of offi	cer administering oath	Printed name of officer administering oath	Title of office	er administering oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2

# FORM JC/OH COVER SHEET PG 3

3	of	41
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18 FILER NAM Martinez,	IE Elizabeth R.	19 Filer ID 00087602	(Ethics C	ommission Filers)
20 SCHEDUL	SUB	TOTAL AMOUNT		
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	33,237.67
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,500.00
3. X	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	5,600.00
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	8,609.99
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	1,320.84
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	1,320.84
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (	OF C/OH	\$	
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$	
12. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	10,581.00

SUBTOTALS - JC/OH

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 1/11 Rpt: 4/41		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Martinez, Eli	zabeth R.		00087602		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)		
10/08/2024	Aguirre, Alex (Mr.)		\$1,000.00		
	6 Contributor address; City; State; Zip Code				
	San Antonio , TX 78231				
8 Contributor's F	Principal Occupation	9 Contributor's Job Title			
Attorney		Attorney			
10 Contributor's e	employer/law firm	<b>11</b> Law firm of contributor's sp	pouse (if any)		
The Aguirre	Law Firm				
12 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 (\$)		
09/04/2024	Brzozowski , Bart (Mr.)		\$260.73		
	Contributor address; City; State; Zip Code				
	San Antonio , TX 78216				
Contributor's F	Principal Occupation	Contributor's Job Title	•		
Attorney		Attorney			
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)		
Law Offices	of Bart Brzozowski	Thompson Coe			
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 (\$)		
09/12/2024	Brzozowski , Bart (Mr.)		\$250.00		
	Contributor address; City; State; Zip Code				
	San Antonio , TX 78216				
Contributor's F	Principal Occupation	Contributor's Job Title	•		
Attorney		Attorney			
Contributor's employer/law firm Law firm of contributor's sp		bouse (if any)			
Law Offices of Bart Brzozowski Thompson Coe					
If contributor is	If contributor is a child, law firm of parent(s) (if any)				
Formo provida -	hy Texas Ethics Commission www.ethic	es state ty us	Version V4.1.0.5dd2ace2		

The Instruction Guide explains how to complete	e this form.	1 Total pages Schedule A(J)1: Sch: 2/11 Rpt: 5/41
2 FILER NAME Martinez, Elizabeth R.		3 Filer ID (Ethics Commission Filers) 00087602
09/04/2024 Canales Law & ADR	AC (ID#:)	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code San Antonio , TX 78259-0000		
8 Contributor's Principal Occupation	9 Contributor's Job Title	
10 Contributor's employer/law firm	11 Law firm of contributor's sp	oouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
09/04/2024 Canales, David A.	Canales, David A.	
San Antonio , TX 78259-0000	Contributor's Job Title	
Contributor's Principal Occupation Mediator	Mediator	
Contributor's employer/law firm Canales Law & ADR	Law firm of contributor's sp	oouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date       Full name of contributor       out-of-state P/         09/12/2024       Cox, Cornelius (Mr.)         Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$200.00
San Antonio , TX 78205		
Contributor's Principal Occupation Attorney	Contributor's Job Title Attorney	
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)
Law Offices of Cornelius N. Cox If contributor is a child, law firm of parent(s) (if any)		
Forms provided by Texas Ethics Commission		Version V4.1.0.5dd2ace2

The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1:
			Sch: 3/11 Rpt: 6/41
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Martinez, Eli			00087602
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
12/26/2024	Daugherty , Sigurd		\$1.00
	6 Contributor address; City; State; Zip Code		
	South Schunder, KS 60057,0000		
<b>9</b> Contributorio [	South Schuyler , KS 60857-0000	<b>0</b> Contributor's Job Title	
Unknown	Principal Occupation	9 Contributor's Job Title Unknown	
	malayor/lay firm		
10 Contributor's e Unknown	ampioyennaw inm	<b>11</b> Law firm of contributor's sp	Jouse (II any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/14/2024	Deyeso, Jane (Mrs.)	)	\$1,500.00
00/1 //2021			
	San Antonio , TX 78259-0000		
Contributor's F	I Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (if any)
Law Office o	f Jane Freeman Deyeso		
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 (\$)
10/02/2024	Duran , Javier T. (Mr.)		\$260.73
	Contributor address; City; State; Zip Code		
	Universal City , TX 78148		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
Germer PLL			
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	cs state tx us	Version V4 1 0 5dd2ace2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 4/11 Rpt: 7/41
2 FILER NAME Martinez, Eli	zabeth R.		3 Filer ID (Ethics Commission Filers) 00087602
4 Date 09/10/2024	<ul> <li>Full name of contributor out-of-state PAC (ID#:</li> <li>Espinoza &amp; Brock PLLC</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$1,000.00
	San Antonio , TX 78216		
8 Contributor's I	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	<b>11</b> Law firm of contributor's sp	oouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date 09/17/2024	Full name of contributorout-of-state PAC (ID#:_ Garza, Pauline (Mrs.) Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$750.00
	San Antonio , TX 78229-0000		
Contributor's I Attorney	Principal Occupation	Contributor's Job Title Attorney	
Garza & Ass		Law firm of contributor's sp	oouse (if any)
It contributor is	s a child, law firm of parent(s) (if any)		
Date 09/17/2024	Full name of contributor out-of-state PAC (ID#:_ Gonzales, Roland Contributor address; City; State; Zip Code	)	Amount of Contribution (\$) \$1,000.00
Contributor's I	San Antonio , TX 78249-0000 Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e Germer PLL	employer/law firm C	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
	hy Texas Ethics Commission www.ethic		Version V/4 1 0 5dd2ace2

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A(J)1: Sch: 5/11 Rpt: 8/41
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Martinez, Eli	zabeth R.		00087602
4 Date	5 Full name of contributor Out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/12/2024	Herrera, Jorge (Mr.)		\$2,500.00
	6 Contributor address; City; State; Zip Code		
	San Antonio , TX 78207		
	Principal Occupation	9 Contributor's Job Title	
Attorney	and the set from	Attorney	
10 Contributor's e The Herrera		<b>11</b> Law firm of contributor's sp	oouse (if any)
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	١	Amount of Contribution (\$)
09/09/2024	Higdon, Hardy and Zuflacht, LLP	)	\$1,000.00
	Contributor address; City; State; Zip Code		
	San Antonio , TX 78230-0000		
Contributor's F	l Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	bouse (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 (\$)
09/17/2024	Landivar, Krizia (Mrs.)		\$200.00
	Contributor address; City; State; Zip Code		
	San Antonio , TX 78023		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
	ell Smith & Lee		
If contributor is	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	cs.state.tx.us	Version V4.1.0.5dd2ace2

The Instrue	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 6/11 Rpt: 9/41	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)	
Martinez, Eli	zabeth R.		00087602	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)	
09/12/2024	Law Office of Letty G. Gavito		\$250.00	
	6 Contributor address; City; State; Zip Code			
	San Antonio , TX 78212			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	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 any)	•		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
09/09/2024	Law Offices of Fidel Rodriguez, Jr.		\$500.00	
	Contributor address; City; State; Zip Code			
	San Antonio , TX 78212			
Contributor's F	l Principal Occupation	Contributor's Job Title	1	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (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 (\$)	
10/17/2024	Law Offices of Fidel Rodriguez, Jr.		\$500.00	
	Contributor address; City; State; Zip Code			
	San Antonio , TX 78212			
Contributor's F	Principal Occupation	Contributor's Job Title		
Contributor 3 1				
Contributor's e	employer/law firm	Law firm of contributor's sp		
Contributor 3 C				
If contributor is	s a child, law firm of parent(s) (if any)			

The Instruction Guide explains how to complete this form.       1 Traid pages Schedule 4(0)::         Sch: 711 Rpt: 10/41       Sch: 711 Rpt: 10/41         Martinez, Elizabeth R.       9 Edit ame of contributor out-of-state PAC (DO:)       7 Amount of Contribution (S)         1003/2024       5 Full name of contributor out-of-state PAC (DO:)       7 Amount of Contributor (S)         2 Date       5 Full name of contributor out-of-state PAC (DO:)       7 Amount of Contributor (S)         2 Outributor's Principal Occupation       9 Contributor's spouse (If any)       7 Amount of Contributor (S)         2 If contributor is a child, law firm of parent(S) (If any)       11 Law firm of contributor's spouse (If any)       Amount of Contributor (S)         2 Date       Full name of contributor out-of-state PAC (DO:)       Amount of Contribution (S)       S260.73         2 Ontributor's employen/law firm       11 Law firm of contributor's spouse (If any)       S260.73       S260.73         2 Outributor's employen/law firm       Contributor's spouse (If any)       Contributor's spouse (If any)       S260.73         2 Contributor's employen/law firm       Contributor's spouse (If any)       Contributor's spouse (If any)       S260.73         2 Contributor's employen/law firm       Contributor's spouse (If any)       Contributor's spouse (If any)       S260.73         2 Ontributor's a					
Martinez, Elizabeth R.       00087602         4 Date 10/03/2024       5 Full name of contributor	The Instruction Guide explains how to complete this fo	rm.			
Martinez, Elizabeth R.       00087602         4 Date 10/03/2024       5 Full name of contributor	2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
10/03/2024       Law Offices of Pat Maloney, PC       \$2,500.00         6       Contributor address; City; State; Zip Code       \$2,500.00         8       Contributor's Principal Occupation       9         10       Contributor's Principal Occupation       9         12       If contributor's andress; City; State; Zip Code       11         Date       Full name of contributor       out-of-state PAC (De:)         Amount of Contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         State       San Antonio, TX 78210-0000       Contributor's opuse (if any)         Contributor's employer/law firm       Law firm of contributor's spouse (if any)       \$260.73         Contributor's Principal Occupation       Contributor's opuse (if any)       \$260.73         Contributor's Principal Occupation       Contributor's spouse (if any)       \$260.73         Contributor's Principal Occupation       Contributor's spouse (if any)       \$260.73         Og/12/2024       Full name of contributor					
6       Contributor address; City: State; Zip Code         San Antonio, TX: 78205       9         8       Contributor's Principal Occupation       9         10       Contributor's employer/law firm       11         12       If contributor's employer/law firm       11         12       If contributor's a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         21       Full name of contributor       out-of-state PAC (IDI:)       Amount of Contribution (\$)         99/12/2024       Full name of contributor       out-of-state PAC (IDI:)       Amount of Contribution (\$)         20       San Antonio, TX 78210-0000       Contributor's Job Title       S260.73         Contributor's Principal Occupation       Contributor's Job Title       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)       \$260.73         Contributor's employer/law firm       Contributor's ob Title       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)       \$100.00         If contributor is a child, law firm of parent(s) (if any)       Law firm of contributor's spouse (if any)       \$100.00         09/12/2024       Full name of contributor       out-of-state PAC (Dir:	4 Date 5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)		
6       Contributor address; City; State; Zip Code         San Antonio , TX 78205       9         8       Contributors Principal Occupation       9         10       Contributors employer/law firm       11         11       Law firm of contributors spouse (if any)         12       If contributor is a child, law firm of parent(s) (if any)       11         Date       Full name of contributor       out-of-state PAC (DPF	10/03/2024 Law Offices of Pat Maloney, PC		\$2,500.00		
San Antonio , TX 78205       9 Contributor's Job Title         10 Contributor's employer/law firm       11 Law firm of contributor's spouse (if any)         12 If contributor is a child, law firm of parent(s) (if any)       11 Law firm of contributor's spouse (if any)         Date       Full name of contributor       out-of-state PAC (D#:)         09/12/2024       Full name of contributor       out-of-state PAC (D#:)         Contributor's Principal Occupation       Contributor's Job Title         Contributor's Principal Occupation       Contributor's Job Title         Contributor is a child, law firm of parent(s) (if any)       Law firm of contributor's spouse (if any)         Contributor's Principal Occupation       Contributor's Job Title         Contributor is a child, law firm of parent(s) (if any)       Law firm of contributor's spouse (if any)         The contributor is a child, law firm of parent(s) (if any)       Law firm of contributor's spouse (if any)         Contributor is a child, law firm of parent(s) (if any)       Law firm of contributor's spouse (if any)         Date       Full name of contributor       out-of-state PAC (ID#:					
8       Contributor's Principal Occupation       9       Contributor's Job Title         10       Contributor's employer/law firm       11       Law firm of contributor's spouse (if any)         12       If contributor is a child, law firm of parent(s) (if any)       11       Law firm of contributor's spouse (if any)         Date       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         Contributor's Principal Occupation       Contributor's Job Title       Construction       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)       Law firm of contributor's spouse (if any)         Date       Full name of contributor					
8       Contributor's Principal Occupation       9       Contributor's Job Title         10       Contributor's employer/law firm       11       Law firm of contributor's spouse (if any)         12       If contributor is a child, law firm of parent(s) (if any)       11       Law firm of contributor's spouse (if any)         Date       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor       out-of-state PAC (D#:)       Amount of Contribution (\$)         Contributor's Principal Occupation       Contributor's Job Title       Construction       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)       Law firm of contributor's spouse (if any)         Date       Full name of contributor					
10 Contributor's employer/law firm       11 Law firm of contributor's spouse (if any)         12 If contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         Date       Full name of contributor	San Antonio , TX 78205				
12 If contributor is a child, law firm of parent(s) (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Luna, Ray (Mr.)       Amount of Contribution (\$)         San Antonio , TX 78210-0000       Contributor's Job Title Construction       Contributor's Job Title Construction         Contributor's employer/law firm Champion Glass, LLC       Law firm of contributor's spouse (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Champion Glass, LLC       Amount of Contributor's spouse (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Pearsall Law Firm, PLLC       Amount of Contribution (\$)         San Antonio , TX 78230-0000       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's address; City: State; Zip Code       Amount of Contribution (\$)         San Antonio , TX 78230-0000       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's spouse (if any)       S100.00	8 Contributor's Principal Occupation	9 Contributor's Job Title			
12 If contributor is a child, law firm of parent(s) (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Luna, Ray (Mr.)       Amount of Contribution (\$)         San Antonio , TX 78210-0000       Contributor's Job Title Construction       Contributor's Job Title Construction         Contributor's employer/law firm Champion Glass, LLC       Law firm of contributor's spouse (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Champion Glass, LLC       Amount of Contributor's spouse (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Pearsall Law Firm, PLLC       Amount of Contribution (\$)         San Antonio , TX 78230-0000       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's address; City: State; Zip Code       Amount of Contribution (\$)         San Antonio , TX 78230-0000       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's spouse (if any)       S100.00					
12 If contributor is a child, law firm of parent(s) (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Luna, Ray (Mr.)       Amount of Contribution (\$)         San Antonio , TX 78210-0000       Contributor's Job Title Construction       Contributor's Job Title Construction         Contributor's employer/law firm Champion Glass, LLC       Law firm of contributor's spouse (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Champion Glass, LLC       Amount of Contributor's spouse (if any)         Date 09/12/2024       Full name of contributor out-of-state PAC (IDF:) Pearsall Law Firm, PLLC       Amount of Contribution (\$)         San Antonio , TX 78230-0000       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's address; City: State; Zip Code       Amount of Contribution (\$)         San Antonio , TX 78230-0000       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's Job Title       S100.00         Contributor's Principal Occupation       Contributor's spouse (if any)       S100.00	10 Contributor's employer/law firm	11 Law firm of contributor's spo	ouse (if any)		
Date 09/12/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Luna, Ray (Mr.)       \$260.73         Contributor address; City; State; Zip Code       San Antonio, TX 78210-0000       \$260.73         Contributor's Principal Occupation       Contributor's Job Title Construction       Contributor's Job Title Construction         Contributor's employer/law firm Champion Glass, LLC       Law firm of contributor's spouse (if any)         If contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor					
Date 09/12/2024       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Luna, Ray (Mr.)       \$260.73         Contributor address; City; State; Zip Code       San Antonio, TX 78210-0000       \$260.73         Contributor's Principal Occupation       Contributor's Job Title Construction       Contributor's Job Title Construction         Contributor's employer/law firm Champion Glass, LLC       Law firm of contributor's spouse (if any)         If contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor	<b>12</b> If contributor is a child, law firm of parent(s) (if any)				
09/12/2024       Luna, Ray (Mr.)       \$260.73         Contributor address; City; State; Zip Code       \$260.73         San Antonio , TX 78210-0000       Contributor's Job Title         Construction       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)         Champion Glass, LLC       Law firm of contributor's spouse (if any)         Date       Full name of contributor       out-of-state PAC (iD#:)         09/12/2024       Full name of contributor       out-of-state PAC (iD#:)         09/12/2024       Full name of contributor       out-of-state PAC (iD#:)         Amount of Contribution (\$)       \$100.00         Contributor's Principal Occupation       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)					
09/12/2024       Luna, Ray (Mr.)       \$260.73         Contributor address; City; State; Zip Code       \$260.73         San Antonio , TX 78210-0000       Contributor's Job Title         Construction       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)         Champion Glass, LLC       Law firm of contributor's spouse (if any)         Date       Full name of contributor       out-of-state PAC (iD#:)         09/12/2024       Full name of contributor       out-of-state PAC (iD#:)         09/12/2024       Full name of contributor       out-of-state PAC (iD#:)         Amount of Contribution (\$)       \$100.00         Contributor's Principal Occupation       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)		. I			
Contributor address; City; State; Zip Code         San Antonio , TX 78210-0000         Contributor's Principal Occupation         Construction         Contributor's employer/law firm         Champion Glass, LLC         If contributor is a child, law firm of parent(s) (if any)         Date         09/12/2024         Full name of contributor address; City; State; Zip Code         09/12/2024         Pearsall Law Firm, PLLC         Contributor's Principal Occupation         Contributor's Job Title         Contributor's employer/law firm         Law firm of contributor's spouse (if any)		)			
San Antonio , TX 78210-0000       Contributor's Principal Occupation       Contributor's Job Title         Construction       Construction       Law firm of contributor's spouse (if any)         Contributor is a child, law firm of parent(s) (if any)       Law firm of contributor's spouse (if any)         Date       Full name of contributor is a child, law firm, PLLC       Amount of Contribution (\$)         09/12/2024       Full name of contributor is child; State; Zip Code       Amount of Contributor (\$)         San Antonio , TX 78230-0000       Contributor's Job Title         Contributor's Principal Occupation       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)			\$260.73		
Contributor's Principal Occupation       Contributor's Job Title         Construction       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)         Champion Glass, LLC       Law firm of contributor's spouse (if any)         If contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)         O9/12/2024       Full name of contributor out-of-state PAC (ID#:)         Contributor's address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)	Contributor address; City; State; Zip Code				
Contributor's Principal Occupation       Contributor's Job Title         Construction       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)         Champion Glass, LLC       Law firm of contributor's spouse (if any)         If contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)         O9/12/2024       Full name of contributor out-of-state PAC (ID#:)         Contributor's address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)					
Contributor's Principal Occupation       Contributor's Job Title         Construction       Construction         Contributor's employer/law firm       Law firm of contributor's spouse (if any)         Champion Glass, LLC       Law firm of contributor's spouse (if any)         If contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)         O9/12/2024       Full name of contributor out-of-state PAC (ID#:)         Contributor's address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)					
Construction       Construction         Contributor's employer/law firm Champion Glass, LLC       Law firm of contributor's spouse (if any)         If contributor is a child, law firm of parent(s) (if any)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       San Antonio , TX 78230-0000       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)	San Antonio , TX 78210-0000				
Contributor's employer/law firm Champion Glass, LLC       Law firm of contributor's spouse (if any)         If contributor is a child, law firm of parent(s) (if any)       If contributor is a child, law firm of parent(s) (if any)         Date       Full name of contributor out-of-state PAC (ID#:) Pearsall Law Firm, PLLC       Amount of Contribution (\$) Pearsall Law Firm, PLLC         Contributor address; City; State; Zip Code       San Antonio , TX 78230-0000       \$100.00         Contributor's Principal Occupation       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)	Contributor's Principal Occupation	Contributor's Job Title			
Champion Glass, LLC   If contributor is a child, law firm of parent(s) (if any)     Date   Date   09/12/2024   Pearsall Law Firm, PLLC   Contributor address; City; State; Zip Code   San Antonio , TX 78230-0000   Contributor's Principal Occupation   Contributor's employer/law firm   Law firm of contributor's spouse (if any)	Construction	Construction			
If contributor is a child, law firm of parent(s) (if any)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Pearsall Law Firm, PLLC       \$100.00         Contributor address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Principal Occupation         Contributor's employer/law firm       Law firm of contributor's spouse (if any)	Contributor's employer/law firm	Law firm of contributor's spo	buse (if any)		
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         09/12/2024       Pearsall Law Firm, PLLC       \$100.00         Contributor address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Principal Occupation         Contributor's employer/law firm       Law firm of contributor's spouse (if any)	Champion Glass, LLC				
09/12/2024       Pearsall Law Firm, PLLC       \$100.00         Contributor address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Dob Title         Contributor's Principal Occupation       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)	If contributor is a child, law firm of parent(s) (if any)				
09/12/2024       Pearsall Law Firm, PLLC       \$100.00         Contributor address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Dob Title         Contributor's Principal Occupation       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)					
09/12/2024       Pearsall Law Firm, PLLC       \$100.00         Contributor address; City; State; Zip Code       \$100.00         San Antonio , TX 78230-0000       Contributor's Dob Title         Contributor's Principal Occupation       Contributor's Job Title         Contributor's employer/law firm       Law firm of contributor's spouse (if any)	Date Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
Contributor address; City; State; Zip Code         San Antonio , TX 78230-0000         Contributor's Principal Occupation         Contributor's employer/law firm         Law firm of contributor's spouse (if any)			.,		
San Antonio , TX 78230-0000         Contributor's Principal Occupation         Contributor's employer/law firm         Law firm of contributor's spouse (if any)					
Contributor's Principal Occupation     Contributor's Job Title       Contributor's employer/law firm     Law firm of contributor's spouse (if any)					
Contributor's Principal Occupation     Contributor's Job Title       Contributor's employer/law firm     Law firm of contributor's spouse (if any)					
Contributor's Principal Occupation     Contributor's Job Title       Contributor's employer/law firm     Law firm of contributor's spouse (if any)	San Antonio TX 78230-0000				
Contributor's employer/law firm Law firm of contributor's spouse (if any)		Contributor's Job Title			
		Contributor 3 300 Thic			
	Contributor's amployor/law firm	Low firm of contributor's con	auso (if any)		
If contributor is a child, law firm of parent(s) (if any)		Law IIIII of contributor 3 spt			
	If contributor is a child low firm of parant(a) (if any)				
	in contributor is a child, law little of parent(s) (if any)				

The Instru	ction Guide evolutions how to complete this f	form	1 Total pages Schedule A(J)1:
The Instruction Guide explains how to complete this form.			Sch: 8/11 Rpt: 11/41
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Martinez, Eli	zabeth R.		00087602
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
09/12/2024	Perez, Roger		\$250.00
	6 Contributor address; City; State; Zip Code		
	San Antonio , TX 78205		
8 Contributor's F	I Principal Occupation	9 Contributor's Job Title	
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
Law Offices	of Roger A. Perez	None	
12 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 (\$)
08/20/2024	Perez, Roger A.		\$250.00
	Contributor address; City; State; Zip Code		1
	San Antonio , TX 78205		
	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
	employer/law firm	Law firm of contributor's sp	bouse (if any)
	of Roger A. Perez		
	s a child, law firm of parent(s) (if any)		
Date 10/01/2024	Full name of contributor out-of-state PAC (ID#: Ramirez, Edward Leo	)	Amount of Contribution (\$) \$100.00
10/01/2024	Contributor address; City; State; Zip Code		
	Contributor address, City, State, Zip Code		
	San Antonio , TX 78213		
Contributor's F	Principal Occupation	Contributor's Job Title	
Retired		Retired	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Retired			
If contributor is	s a child, law firm of parent(s) (if any)	1	
Formo providad	hy Texas Ethics Commission www.ethic	s state ty us	Version V4.1.0.5dd2ace2

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 9/11 Rpt: 12/41
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Martinez, Eliz	zabeth R.		00087602
	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
10/21/2024	Rock, Arthur (Mr.)		\$2,500.00
	6 Contributor address; City; State; Zip Code		
<b>0</b> Constributorio I	San Francisco , CA 94105	Contributorio Joh Title	
Self Employe	Principal Occupation	9 Contributor's Job Title Self Employed	
10 Contributor's e		11 Law firm of contributor's sp	nouse (if any)
Arthur Rock		II Law IIIII of contributors sp	
	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
09/12/2024	Rosenthal Pauerstein Sandoloski Agather LLP	)	\$1,000.00
	Contributor address; City; State; Zip Code		
	San Antonio , TX 78212		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (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 (\$)
09/11/2024	Ruiz, Freddy (Mr.)		\$500.00
	Contributor address; City; State; Zip Code		
	San Antonio , TX 78209-0000		
Attorney	Principal Occupation	Contributor's Job Title Attorney	
	mployer/law firm	Law firm of contributor's sp	pource (if any)
	of Freddy B. Ruiz		
	s a child, law firm of parent(s) (if any)		
Forms provided	by Texas Ethics Commission www.ethic	s.state.tx.us	Version V4.1.0.5dd2ace2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 10/11 Rpt: 13/41
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Martinez, Eli	zabeth R.		00087602
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)
09/17/2024	Salinas , George (Mr.)		\$2,604.48
	6 Contributor address; City; State; Zip Code		
	San Antonio , TX 78201		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	•
Attorney		Attorney	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	oouse (if any)
George Salir	nas Injury Lawyers		
12 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 (\$)
10/08/2024	Snell , David (Mr.)		\$250.00
	Contributor address; City; State; Zip Code		
	San Antonio , TX 78209-0000		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Attorney	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Snell & Snel	I, LP		
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 (\$)
10/02/2024	The Bexar County Justice PAC of SATLA		\$1,500.00
	Contributor address; City; State; Zip Code		
	San Antonio , TX 78232		
Contributor's F	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 any)		

<b></b>			1 Total pages Schedule A(J)1:
I ne Instru	ction Guide explains how to complete this fo	Sch: 11/11 Rpt: 14/41	
2 FILER NAME			<b>3</b> Filer ID (Ethics Commission Filers)
Martinez, El	zabeth R.		00087602
4 Date	5 Full name of contributor out-of-state PAC (ID#:	)	<ul><li>7 Amount of Contribution (\$)</li></ul>
10/25/2024	Thomas J. Henry Law PLLC	)	\$5,000.00
10/20/2024	-		
	6 Contributor address; City; State; Zip Code		
	San Antonio , TX 78269-0000		
8 Contributor's	Principal Occupation	9 Contributor's Job Title	
10 Contributor's	employer/law firm	11 Law firm of contributor's sp	ouse (if any)
12 If contributor	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)
10/07/2024	Thomas J. Henry Law PLLC	)	\$5,000.00
10/01/2024			
	Contributor address, City, State, Zip Code		
	San Antonio , TX 78269-0000		
Contributor's	Principal Occupation	Contributor's Job Title	
Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
If contributor	s a child, law firm of parent(s) (if any)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this	form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/41		
2 FILER NAME		3 Filer ID (Ethics Commission Filers)		
Martinez, Elizabeth R.		00087602		
<sup>4</sup> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$		
5 Date       6 Full name of contributor       □ out-of-state PAC (ID#:)         09/12/2024       Diaz , Rey (Mr.)         7 Contributor address; City; State; Zip Code	)	8 Amount of 9 In-kind contribution contribution (\$) 9 Excription \$2,500.00   Hosting Fundraiser with Drinks and Food		
San Antonio , TX 78212		Check if travel outside of Texas. Complete Schedule T.		
<b>10</b> 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)			
Attorney	Attorney			
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)			
Law Offices of Rey Diaz				
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

# PLEDGED CONTRIBUTIONS (JUDICIAL)

The Inst	ruction Guide explains how to complet	te this form.	1 Total pages Sche Sch: 1/1 Rpt: 1			
2 FILER NAME Martinez, Elizab	eth R.	3 Filer ID (Ethics Commission Filers) 00087602				
<sup>4</sup> TOTAL OF UN	IITEMIZED PLEDGES			\$ 0.00		
5 Date 09/23/2024	<ul> <li>6 Full name of pledgor out-of-state PAC (ID#:_Davis, J.A. (Mr.)</li> <li>7 Pledgor Address; City; State; Zip C</li> </ul>	8 Amount of pledge (\$) \$600.00	9 In-kind description (If applicable)			
	San Antonio , TX 78221		Check if travel out	side of Texas. Complete Schedule T		
10 Pledgor's principal Attorney	occupation	11 Pledgor's job title Attorney				
12 Pledgor's employe J.A. Davis & Ass		13 Law firm of pledgor's	spouse (if any)			
<b>14</b> If pledgor is a child	d, law firm of parent(s) (if any)	I				
Date 12/31/2024	Full name of pledgor out-of-state PAC (ID#:_ Thomas J. Henry Law PLLC Pledgor Address; City; State; Zip C		Amount of pledge (\$) \$5,000.00	In-kind description (If applicable)		
	San Antonio , TX 78269		Check if travel outside of Texas. Complete Schedule T.			
Pledgor's principa	occupation	Pledgor's job title				
Pledgor's employe	r/law firm	Law firm of pledgor's	spouse (if any)			
If pledgor is a child	l, law firm of parent(s) (if any)	I				

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing Ex Salaries/W	pense /ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 1/8 Rpt: 17/41		Martinez, Elizabeth R.				00087602
4	Date	5	Payee name				
	08/19/2024		3D Signs				
6	Amount (\$)	7		Zip Co	de		
	\$92.01		7986 1st Street				
			Somerset, TX 78069				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	odulo)	(b) Description		
	OF	Ľ	Printing Expense	euule)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE				Check if Austin	, тх,	officeholder living expense
					Invitations to	Vic	ctory Party
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
	Date		Payee name				
	09/04/2024		Anedot				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$10.73			210 00			
	φ10.75		1920 McKinnney Ave.				
			7th Floor				
			Dallas, TX 75201				
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description		
	OF EXPENDITURE		Fees				de of Texas. Complete Schedule T.
							officeholder living expense
					Processing F	ees	6
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held
		•					
	Date		Payee name				
	09/12/2024		Anedot				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$10.30		1920 McKinnney Ave.				
			7th Floor				
			Dallas, TX 75201				
				i			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	edule)	(b) Description	out	do of Toylog, Complete Cabadula T
	EXPENDITURE		Fees				de of Texas. Complete Schedule T. officeholder living expense
					Processing F		
					recooning r		-
	Complete ONIL V if direct	Ľ	Condidate/Officeholder	)ffice com	abt		Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ynt		Office held
	,						

CONTRIBUTIO	PENDITURES FROM POLITIC/ NS	<b>~</b> L	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office C Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement verhead/Rental Expense Expense Expense /Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 2/8 Rpt: 18/41	· · · · · · · · · · · · · · · · · · ·	3	Filer ID (Ethics Commission Filers) 00087602
4 Date 09/12/2024	5 Payee name Anedot	I	
6 Amount (\$) \$100.30	<ul> <li>Payee address; City; State; Zip C 1920 McKinnney Ave.</li> <li>7th Floor</li> <li>Dallas, TX 75201</li> </ul>	Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		de of Texas. Complete Schedule T. officeholder living expense S
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	bught	Office held
Date 09/12/2024	Payee name Anedot		
Amount (\$) \$10.73	Payee address; City; State; Zip C 1920 McKinnney Ave. 7th Floor Dallas, TX 75201	Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		de of Texas. Complete Schedule T. officeholder living expense S
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	bught	Office held
Date 09/14/2024	Payee name Anedot		
Amount (\$) \$60.30	Payee address; City; State; Zip C 1920 McKinnney Ave. 7th Floor Dallas, TX 75201	Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees		de of Texas. Complete Schedule T. officeholder living expense S
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	bught	Office held

POLITICAL EX CONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 3/8 Rpt: 19/41	2 FILER NAME Martinez, Elizabeth R.	3 Filer ID (Ethics Commission Filers) 00087602
4 Date 09/17/2024	5 Payee name Anedot	•
6 Amount (\$) \$104.48	<ul> <li>Payee address; City; State; Zip Code</li> <li>1920 McKinnney Ave.</li> <li>7th Floor</li> <li>Dallas, TX 75201</li> </ul>	
8 PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense FCCS
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought H	Office held
Date 09/17/2024	Payee name Anedot	
Amount (\$) \$30.30	Payee address; City; State; Zip Code 1920 McKinnney Ave. 7th Floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense EeeS
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought H	Office held
Date 09/17/2024	Payee name Anedot	
Amount (\$) \$40.30	Payee address; City; State; Zip Code 1920 McKinnney Ave. 7th Floor Dallas, TX 75201	
PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. n, TX, officeholder living expense FeeS
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought H	Office held

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	aymer erhead pense (pens /ages	nt/Reimbursement i/Rental Expense e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 4/8 Rpt: 20/41		Martinez, Elizabeth R.					00087602
4	Date	5	Payee name					
	10/02/2024		Anedot					
6	Amount (\$)	7	Payee address; City; State	e; Zip Co	de			
	\$10.73		1920 McKinnney Ave.					
			7th Floor					
			Dallas, TX 75201					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description		
	OF EXPENDITURE		Fees	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			outsi	de of Texas. Complete Schedule T.
	LAFENDITORE							officeholder living expense
						Processing F	ees	3
_				0.11				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	10/08/2024		Anedot					
	Amount (\$)		Payee address; City; State	; Zip Co	de			
	\$40.30		1920 McKinnney Ave.					
			7th Floor					
			Dallas, TX 75201					
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hadula)	(b)	Description		
		ľ	Fees	neuule)	.,	·	outsi	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
						Processing F	ees	5
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held
	Date		Payee name					
	10/08/2024		Anedot					
	Amount (\$)		Payee address; City; State	; Zip Co	de			
	\$10.73		1920 McKinnney Ave.					
			7th Floor					
			Dallas, TX 75201					
	PURPOSE	(a)	Category (See Categories listed at the top of this sc	hadula)	(b)	Description		
	OF		Fees	neuule)	()		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE							officeholder living expense
						Processing F	ees	3
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght		_	Office held

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment		Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor			Solicitation/Fundraising Expense Transportation Equipment & Related Exp Travel in District Travel Out of District OTHER (enter a category not listed abov			Related Expense			
1	Total pages Schedule F1:	2	FILER NAM	=					3	Filer ID	(Ethics Co	ommission Filers)
-	Sch: 5/8 Rpt: 21/41		Martinez, E							00087602		
4	Date	5	Payee name									
	12/26/2024		Anedot									
6	Amount (\$)	7	Payee addre	ss; City;	State;	; Zip Coo	de					
	\$0.34	\$0.34 1920 McKinnney Ave.										
			7th Floor									
			Dallas, TX	75201								
8	PURPOSE	(2)	<u> </u>				(h)	Description				
°	OF	(a)		ee Categories listed a	at the top of this sch	nedule)	(D)	Description	outei	de of Texas. Com	nlata Schadul	lo T
	EXPENDITURE		Fees							officeholder living		ic 1.
								Processing F		-		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	C	Dffice sou	ght			Office he	eld	
	Date		Payee name									
	10/31/2024		Democracy	Engine								
	Amount (\$)		Payee addre	ss; City;	State;	; Zip Co	de					
	\$125.01		416 Florida	Ave.								
			NW #2641	2								
			wasningto	n , DC 20001								
	PURPOSE	(a)	Category (S	ee Categories listed a	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Fees							de of Texas. Com		le T.
										officeholder living		
Credit Card Processing Fees												
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ght			Office he	eld	
	Date		Payee name									
	08/08/2024		Hispanas L									
-		-	Payee addre		Ctoto	; Zip Co	de					
	Amount (\$)				State,	, zip coo	ue					
	\$1,029.30		411 SW 24	in Street								
			San Antoni	o , TX 78207								
	PURPOSE	(a)	Category (S	ee Categories listed a	at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Contributio	ns/Donations M	/lade By			Check if travel	outsi	de of Texas. Com	plete Schedul	le T.
			Candidate/	Officeholder/P	olitical Comm	nittee				officeholder living		
								Hispanas Un	Idas	s 40th Confe	erence	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	(	Office sou	ght			Office he	eld	
⊢												

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment		Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gitl/Awards/Memorials Expense     Printing Expense       Legal Services     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)						
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
	Sch: 6/8 Rpt: 22/41	Martinez, Elizabeth R.	00087602						
4	Date 12/31/2024	Payee name IBC							
6	Amount (\$) \$10.00	7 Payee address;       City;       State; Zip Code         \$10.00       130 E. Travis         San Antonio , TX 78205							
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Accounting/Banking       (b) Description Check if taxel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fee for Cashiers Check									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/13/2024	Kosub Consulting, LLC							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$3,500.00	15025 Cadillac Drive San Antonio , TX 78248-0000							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/14/2024	Martinez , Elizabeth (Mrs.)							
	Amount (\$) \$1,949.95	Payee address;City;State;Zip CodePO Box 830353							
		San Antonio, TX 78214							
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense Int - Political Expenses from Personal eport						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	2 FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)						
	Sch: 7/8 Rpt: 23/41	Martinez, Elizabeth R.	00087602						
4	Date 07/15/2024	Payee name North East Bexar County Democrats							
6	Amount (\$) \$140.00	7 Payee address; City; State; Zip Code P.O. Box 700766 San Antonio , TX 78270-0766							
8	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense • Day Table at Luncheon						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/15/2024	NorthWest Democrats							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$160.00	P.O. Box 681911 San Antonio , TX 78268							
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense nd Ticket in the Pat Maloney Sr. Public d Dinner						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/13/2024	Novellion							
	Amount (\$) \$843.18	Payee address; City; State; Zip Code 13423 Blanco Rd. #307 San Antonio , TX 78216							
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense ting Expenses						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	rage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	pense Transportation Equipment & Rela Travel in District Travel Out of District				
The Instruction Guide explains how to complete this form.								
<b>1</b> Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Etl	nics Commiss	sion Filers)			
Sch: 1/8 Rpt: 25/41	Martinez, Elizabeth	R.		00087602				
4 CREDIT CARD ISSUER		ncial institution e - MB	5 TOTAL OF UNITEMI EXPENDITURES CHARGED TO A CR CARD	\$				
6 PAYMENT	(a) Amount Charged \$85.00	(b) Date of Charge 11/22/2024	(c) Date(s) Credit Card 11/26/2024	Issuer Paid				
7 PAYEE	(a) Payee name	1	(b) Payee address;	City,	State,	Zip Code		
	Alamo Colleges		218 W. Ashby Pl					
			San Antonio , TX 782	212				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Ticket for GED Lunch	heon				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	tin, TX, officeholder living e	kpense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$300.00	(b) Date of Charge 07/17/2024	(c) Date(s) Credit Card 07/19/2024	Issuer Paid				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
	San Antonio Black Lawyers		P.O. Box 831202 San Antonio , TX 782	283				
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	Tickets to SABA Gala					
X Political	Event Expense							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	tin, TX, officeholder living e	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid				
	\$75.00	07/25/2024	08/14/2024					
PAYEE	(a) Payee name	-	(b) Payee address;	City,	State,	Zip Code		
	State Bar of Texas	- Texas Bar	PO Box 12487					
			Austin , TX 78711					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Texas Bar College D	ues				
X Political	Texas Bar College Du	631						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	tin, TX, officeholder living e	kpense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held				
expenditure to benefit C/OH								

	EXPENDITURE CATEGORIES FOR BOX 10(a)								
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee		Fees Food/Beverage Expense - Gift/Awards/Memorials Expense		Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipmen Travel in District Travel Out of District				
		The Inst	ow to complete this form.						
<b>1</b> T	otal pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethic	s Commiss	sion Filers)			
s	Sch: 2/8 Rpt: 26/41	Martinez, Elizabeth	R.		00087602				
	REDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEMIZEI					
	SSUER	see p	revious	EXPENDITURES \$ CHARGED TO A CREDIT CARD					
6 F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid				
		\$20.00	07/31/2024	08/14/2024					
7 F	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code		
				P.O. Box 2297					
		Bexar County Worr	iens Bar						
				San Antonio , TX 78298					
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
		Event Expense	· · · · · · · · · · · · · · · · · · ·	Ticket to DEI Luncheon					
	X Political								
	Non-Political		of Texas. Complete Schedule		X, officeholder living expe	ense			
	Complete <u>ONLY</u> if direct enditure to benefit C/OH	Candidate/Officeholder		ffice sought	Office held				
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 09/12/2024	ıer Paid				
		\$162.38	09/12/2024	09/12/2024					
F	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
		A Dream Weaver F	loriet	1630 E. Houston St.					
		A Dieani weaver F	101131						
				San Antonio , TX 78202 (b) Description					
	VURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)		Flowers for Host Fundraiser				
	X Political	Event Expense							
	Non-Political	(a) Chaok if travel outside	of Toyoc, Complete Schodule		X, officeholder living expe	2000			
	Complete ONLY if direct	(c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Offic		ffice sought	Office held	51130			
	enditure to benefit C/OH								
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ıer Paid				
		\$75.55	10/14/2024						
F	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code		
		United States Posta	al Sonvico	2400 McCullough Ave.					
		United States FUSIA							
<u> </u>		(a) Catagor <i>i</i>		San Antonio , TX 78212 (b) Description					
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule)	Stamps					
	X Political	Stamps		otampo					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expe	ense			
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held				
ехр	enditure to benefit C/OH								

EXPENDITURE CATEGORIES FOR BOX 10(a)										
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards	age Expense /Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipm Travel in District Travel Out of District						
The Instruction Guide explains how to complete this form.										
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission File							
Sch: 3/8 Rpt: 27/41	Martinez, Elizabeth	R.		00087602						
4 CREDIT CARD	Name of finan	ncial institution	5 TOTAL OF UNITEMIZ							
ISSUER	see pr	evious	EXPENDITURES CHARGED TO A CRE CARD	EDIT						
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid						
	\$43.30	10/02/2024								
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
			11933 Perrin Beitel							
	EZ Copy Service									
			San Antonio , TX 7821	San Antonio , TX 78217						
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top of Printing Expense	of this schedule)	Postcard Printing							
X Political	· ····································									
Non-Political	(C) Check if travel outside of	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living e	xpense					
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held						
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is 09/05/2024	ssuer Paid						
	\$35.00	08/21/2024	09/05/2024							
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	San Antonio Bar As	constion	PO BOX 821165							
	San Aniuniu dai As	Socalion								
			San Antonio , TX 7828	83						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description Ticket to SABA General Meeting and Past Presidents Lunch							
_	Event Expense	· · · · · · · · · · · · · · · · · · ·	Ticket to SABA General Meeting and Past Presidents Lunch							
X Political										
Non-Political		of Texas. Complete Schedule		n, TX, officeholder living e	xpense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Of	ffice sought	Office held						
	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid						
FAIMENT	., .	()	10/15/2024							
	\$65.00	10/03/2024								
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code				
	(u) r uyee name		PO BOX 6344	Only;	olulo,					
	San Antonio Young	Lawyers								
			San Antonio , TX 7820	09						
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top of this schedule)		TIcket for Judicial Jamboree							
X Political	Fees									
Non-Political	(C) Check if travel outside c	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living e	xpense					
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Of	ffice sought	Office held						
expenditure to benefit C/OH										

**EXPENDITURES MADE BY CREDIT CARD** 

Forms provided by Texas Ethics Commission

	EXP	ENDITURE CATEGOR	IES FOR BOX 10(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica	y - Gift/Award	erage Expense Is/Memorials Expense	Office Overhead/Rental Expense Polling Expense Printing Expense	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 h	ow to complete this form.	
<b>1</b> Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Sch: 4/8 Rpt: 28/41	Martinez, Elizabeth	R.		00087602
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZE	
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CRED CARD	⊤ 
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid
	\$75.00	11/27/2024	12/12/2024	
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code
		<b>.</b>	2020 Pennsylvania Ave	
	Hispanic National E	Bar Association	NW Suite 279	
			Washington DC , TX 20	006
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description	
	Fees	of this schedule)	Dues	
X Political				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Of	ffice sought	Office held
expenditure to benefit C/OH				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid
	\$73.00	12/17/2024		
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code
			2400 McCullough Ave.	
	United States Posta	al Service		
			San Antonio , TX 78212	
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Description	
	Stamps	or this schedule)	Stamps	
X Political				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	r name Of	ffice sought	Office held
expenditure to benefit C/OH		1		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu 09/28/2024	ier Paid
	\$12.41	09/12/2024	09/20/2024	
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code
	PlanetArt, LLC		23801 Calabasas Road	
			Ste 2005	
	(a) Catagor:		Calabasas, CA 91302	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Pictures	
X Political	Advertising Expense			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin, T	X, officeholder living expense
Complete ONLY if direct	Candidate/Officeholder	r name Of	ffice sought	Office held
expenditure to benefit C/OH				

	Advortising Exponso			RIES FOR BOX 10(a)	Solicitation	n/Eundraising Expon	20	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Exp Fees Food/Beve Gift/Award	ense erage Expense s/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense	Transport Travel in [	n/Fundraising Expens ation Equipment & Re District It of District		Expense
	Candidate/Officeholder/Politica	I Committee Legal Serv	vices	Salaries/Wages/Contract Labor		enter a category not li	sted ab	iove)
1 -	Total pages Schedule F4:	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains	how to complete this form.	<b>a</b> 5	iler ID (Ethics Co	nmice	ion Eilors)
	Sch: 5/8 Rpt: 29/41	Martinez, Elizabeth	R			87602	1111155	ION FILEIS)
	CREDIT CARD		ncial institution	5 TOTAL OF UNITER		51002		
	ISSUER		se - PV	EXPENDITURES CHARGED TO A C CARD	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	l Issuer Paid			
-		\$24.87	09/12/2024	09/28/2024				
7	PAYEE	(a) Payee name		(b) Payee address;	Cit	iv. St	ate,	Zip Code
				410 Terry Ave. N			,	·
		Amazon						
				Seattle , WA 98109	1			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	_			
		Personalized Stamp	or this solicidate)	Personalized Stam	р			
	X Political							
	Non-Political		of Texas. Complete Schedul			older living expense		
ex	Complete <u>ONLY</u> if direct penditure to benefit C/OH	Candidate/Officeholder		Office sought		ice held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card 09/28/2024	d Issuer Paid			
		\$26.28	09/12/2024	03/20/2024				
	PAYEE	(a) Payee name		(b) Payee address;	Cit	iy, St	ate,	Zip Code
		A		410 Terry Ave. N				
		Amazon						
		(a) Category		(b) Description				
	PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	Thank you Cards				
	X Political	Thank you Cards		,,				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedul		ustin, TX, officeho	older living expense		
	Complete ONLY if direct	Candidate/Officeholder	name (	Office sought	Offi	ice held		
	penditure to benefit C/OH PAYMENT	(a) Amount Channed	(b) Data of Charge	(a) Data(a) Cradit Carr	d laavax Daid			
	PAYMENI	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card 09/28/2024	u Issuer Palu			
		\$28.95	09/12/2024					
	PAYEE	(a) Payee name		(b) Payee address;	Cit	iv. St	ate,	Zip Code
				410 Terry Ave. N		y, o.	,	p 0000
		Amazon						
				Seattle , WA 98109	)			
		(a) Category	of this schodulo)	(b) Description				
		(See Categories listed at the top Advertising Expense	or this schedule)	Picture Bookmark S	Sleeves and	Magnet Squa	res	
	X Political							
	Non-Political		of Texas. Complete Schedul			older living expense		
	Complete <u>ONLY</u> if direct penditure to benefit C/OH	Candidate/Officeholder	name (	Office sought	Offi	ice held		
ex								

#### EXPENDITURES MADE BY CREDIT CARD

Forms provided by Texas Ethics Commission

EXPENDITURES MADE BY CREDIT CARD	

		EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Tra Tra Tra	icitation/Fundraising E nsportation Equipmen vel in District vel Out of District HER (enter a category	& Related I	
L			ruction Guide explains h	now to complete this form.				
1	Total pages Schedule F4:		_			3 Filer ID (Ethic	s Commiss	ion Filers)
	Sch: 6/8 Rpt: 30/41	Martinez, Elizabeth				00087602		
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZE EXPENDITURES CHARGED TO A CREL CARD		\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer	Paid		
		\$19.38	09/10/2024	09/12/2024				
7	PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code
		Amazon		410 Terry Ave. N				
				Seattle , WA 98109				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top PostCards	of this schedule)	(b) Description PostCards				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		тх	officeholder living expe	nso	
9	Complete <u>ONLY</u> if direct	Candidate/Officeholder		iffice sought	17, 0	Office held	1130	
	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer	Paid		
		\$18.35	09/12/2024	09/28/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;		City,	State,	Zip Code
		Amazon		410 Terry Ave. N				
				Seattle , WA 98109				
	PURPOSE OF	(a) Category		(b) Description				
		(See Categories listed at the top Envelopes	of this schedule)	Envelopes				
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, d	officeholder living expe	nse	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer	Paid		
		\$65.89	09/30/2024	10/09/2024				
	PAYEE	(a) Payee name	1	(b) Payee address;		City,	State,	Zip Code
				410 Terry Ave. N				
		Amazon						
				Seattle , WA 98109				
	PURPOSE OF	(a) Category	of this schodule)	(b) Description				
		(See Categories listed at the top Stationery	or mis schedule)	Stationery				
	X Political							
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, d	officeholder living expe	nse	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH							

	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards al Committee Legal Serv	erage Expense s/Memorials Expense rices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraisin Transportation Equipn Travel in District Travel Out of District OTHER (enter a categ	nent & Related E	
		ruction Guide explains	how to complete this form.			
<b>1</b> Total pages Schedule F4:		_		3 Filer ID (Et	hics Commiss	sion Filers)
Sch: 7/8 Rpt: 31/41	Martinez, Elizabeth			00087602		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$41.57	12/17/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Walmart		8500 Jones Maltsberg	ger Rd,		
			San Antonio , TX 7821	16		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description			
	Event Expense	or this schedule)	Invitations			
X Political						
Non-Political		of Texas. Complete Schedule		n, TX, officeholder living e	xpense	
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Palu		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
Political						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T.			
Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
Non-Political	(c) Chack if travel outside	of Texas. Complete Schedule				
Complete ONLY if direct expenditure to benefit C/OH	(c) Check if travel outside Candidate/Officeholder	•	Dffice sought	Office held		

#### EXPENDITURES MADE BY CREDIT CARD

Forms provided by Texas Ethics Commission

EXPENDITURES MADE BY CREDIT CARD
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	EXPENDITURE CATEGORIES FOR BOX 10(a)						
	Advertising Expense	Event Expe	ense	Loan Repayment/Reimbursement	Solicitation/Fundraising		
	Accounting/Banking Consulting Expense		rage Expense	Office Overhead/Rental Expense Polling Expense	Transportation Equipme Travel in District	ent & Related	±xpense
	Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award I Committee Legal Serv	s/Memorials Expense ices	Printing Expense Salaries/Wages/Contract Labor	Travel Out of District OTHER (enter a catego	rv not listed a	oove)
		5		ow to complete this form.		.,	,
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethi	cs Commiss	sion Filers)
	Sch: 8/8 Rpt: 32/41	Martinez, Elizabeth	R.		00087602		
4			ncial institution	5 TOTAL OF UNITEMIZE	ED		
	ISSUER		e - SW	EXPENDITURES	\$		
		Chas	e - 3w	CHARGED TO A CREI			
	DAVMENT		(h) Data at Charge	CARD			
۴	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss 10/09/2024	suer Paid		
		\$13.91	10/01/2024	10/09/2024			
7	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
				23801 Calabasas Road	b		
		PlanetArt, LLC		Ste 2005			
				Calabasas, CA 91302			
8	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Pictures			
	X Political	Advertising Expense					
		· . <b>F</b>					
	Non-Political		of Texas. Complete Schedule		TX, officeholder living exp	oense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought	Office held		
e	xpenditure to benefit C/OH		i				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
		\$10.00	11/16/2024	11/26/2024			
	PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
				P.O. Box 681911			
		NorthWest Democr	ats				
				San Antonio , TX 7826	8		
	PURPOSE OF	(a) Category		(b) Description			
	EXPENDITURE	(See Categories listed at the top		Breakfast			
	X Political	Food/Beverage Expe	nse				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Austin	TX, officeholder living exp	nense	
⊢	Complete ONLY if direct	Candidate/Officeholder	•	ffice sought	Office held	50130	
e	xpenditure to benefit C/OH						
⊢	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	suer Paid		
				12/12/2024			
		\$50.00	12/02/2024				
<u> </u>	PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
		(a) Fayee hame			City,	State,	Zip Coue
		Bexar County Wom	iens Bar	P.O. Box 2297			
					_		
⊢				San Antonio , TX 7829	8		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description			
		Event Expense		Holiday Luncheon			
	X Political						
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living exp	oense	
	Complete ONLY if direct	Candidate/Officeholder	name Of	ffice sought	Office held		
e	xpenditure to benefit C/OH						
<b>—</b>							

POLITICAL EX	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 1/8 Rpt: 33/41	2 FILER NAME Martinez, Elizabeth R.	3	Filer ID (Ethics Commission Filers) 00087602		
4 Date 09/12/2024	5 Payee name A Dream Weaver Florist				
6 Amount (\$) \$162.38	<ul> <li>7 Payee address; City; State; Zip C 1630 E. Houston St.</li> </ul>	ode			
X         Reimbursement from political contributions intended	San Antonio , TX 78202				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense <b>-undraiser</b>		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 11/22/2024	Payee name Alamo Colleges				
Amount (\$) \$85.00	Payee address; City; State; Zip C 218 W. Ashby Pl	ode			
X Reimbursement from political contributions intended	San Antonio , TX 78212				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense I <b>cheon</b>		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 09/10/2024	Payee name Amazon				
Amount (\$) \$19.38	Payee address; City; State; Zip C 410 Terry Ave. N	ode			
X Reimbursement from political contributions intended	Seattle , WA 98109				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Postcards		Check if travel outside of Texas. Complete Schedule T. 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		

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS SCHEDULE G				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E / - Gift/Awards/Memorials Expense Printing	payment/Reimbursement       Solicitation/Fundraising Expense         verhead/Rental Expense       Transportation Equipment & Related Expense         xpense       Travel in District         Expense       Travel Out of District         Wages/Contract Labor       OTHER (enter a category not listed above)				
1 Total pages Schedule G: Sch: 2/8 Rpt: 34/41	2 FILER NAME Martinez, Elizabeth R.	3 Filer ID (Ethics Commission Filers) 00087602				
4 Date 09/12/2024	5 Payee name Amazon					
6 Amount (\$) \$28.95	<ul> <li>7 Payee address; City; State; Zip C 410 Terry Ave. N</li> </ul>					
X         political contributions intended           8         PURPOSE	Seattle, WA 98109 (a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense Bookmark Sleeves for Pictures and Magnet Squares				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date	Payee name					
09/12/2024	Amazon					
Amount (\$) \$18.35	Payee address; City; State; Zip C 410 Terry Ave. N	ode				
X         Reimbursement from political contributions intended	Seattle , WA 98109					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Envelopes for Thank You Cards	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Envelopes for Thank You Cards				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				
Date 09/12/2024	Payee name Amazon					
Amount (\$) \$26.28	Payee address; City; State; Zip C 410 Terry Ave. N	ode				
X Reimbursement from political contributions intended	Seattle , WA 98109					
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Thank you Cards	Description Check if travel outside of Texas. Complete Schedule T.				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held				

P	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
Ac Cc Cc	dvertising Expense ccounting/Banking onsulting Expense ontributions/ Donations Made By Candidate/Officeholder/Politica redit Card Payment	Fees Office Ov Food/Beverage Expense Polling Ex - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement       Solicitation/Fundraising Expense         verhead/Rental Expense       Transportation Equipment & Related Expense         xpense       Travel in District         Expense       Travel Out of District         Wages/Contract Labor       OTHER (enter a category not listed above)				
	tal pages Schedule G: h: 3/8 Rpt: 35/41	2 FILER NAME Martinez, Elizabeth R.	3 Filer ID (Ethics Commission Filers) 00087602				
4 Da 09	te /12/2024	5 Payee name Amazon					
6 Am	nount (\$) \$24.87 Reimbursement from political contributions intended	<ul> <li>Payee address; City; State; Zip Co 410 Terry Ave. N</li> <li>Seattle , WA 98109</li> </ul>	410 Terry Ave. N				
8 E2	PURPOSE OF XPENDITURE	(a) Category (See Categories listed at the top of this schedule) Personalized Stamp	(b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Personalized Stamp				
	penditure to benefit	Candidate/Officeholder name	Office sought Office held				
Da	te	Payee name					
09	/30/2024	Amazon					
Am	nount (\$) \$65.89 Reimbursement from political contributions	Payee address; City; State; Zip Co 410 Terry Ave. N	ode				
E	PURPOSE OF XPENDITURE	Seattle, WA 98109 Category (See Categories listed at the top of this schedule) Stationary	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Stationary				
	penditure to benefit	l Candidate/Officeholder name	Office sought Office held				
Da 07	te /31/2024	Payee name Bexar County Womens Bar					
Am	nount (\$) \$20.00	Payee address; City; State; Zip Co P.O. Box 2297	ode				
X	Reimbursement from political contributions intended	San Antonio , TX 78298					
E	PURPOSE OF XPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Ticket for 3rd Annual DEI Lunch				
	penditure to benefit	Candidate/Officeholder name	Office sought Office held				

F	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling Exp / - Gift/Awards/Memorials Expense Printing E	payment/Reinbursement     Solicitation/Fundraising Expense       verhead/Rental Expense     Transportation Equipment & Related Expense       xpense     Travel in District       Expense     Travel Out of District       Wages/Contract Labor     OTHER (enter a category not listed above)				
	otal pages Schedule G: ch: 4/8 Rpt: 36/41	2 FILER NAME Martinez, Elizabeth R.	3 Filer ID (Ethics Commission Filer 00087602	rs)			
	ate 2/02/2024	5 Payee name Bexar County Womens Bar	I				
6 AI	mount (\$) \$50.00	<ul> <li>7 Payee address; City; State; Zip Co P.O. Box 2297</li> <li>San Antonio , TX 78298</li> </ul>	P.O. Box 2297				
8 E	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Check if travel outside of Texas. Complete Schedu Check if Austin, TX, officeholder living expense Holiday Luncheon	ule T.			
e>	omplete <u>ONLY</u> if direct xpenditure to benefit /OH	Candidate/Officeholder name	Office sought Office held				
Di	ate	Payee name					
10	0/02/2024	EZ Copy Service					
A	mount (\$) \$43.30	Payee address; City; State; Zip Co 11933 Perrin Beitel	ode				
	intended	San Antonio , TX 78217	·				
E	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedu Check if Austin, TX, officeholder living expense Printing Postcards	ule T.			
e>	omplete <u>ONLY</u> if direct xpenditure to benefit /OH	Candidate/Officeholder name	Office sought Office held				
D	ate	Payee name					
1	1/27/2024	Hispanic National Bar Association					
Aı	mount (\$) \$75.00	Payee address; City; State; Zip Co 2020 Pennsylvania Ave.	ode				
	Reimbursement from political contributions intended	NW Suite 279 Washington DC , TX 20006					
E	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Check if travel outside of Texas. Complete Schedu	ule T.			
e>	omplete <u>ONLY</u> if direct xpenditure to benefit /OH	L Candidate/Officeholder name	Office sought Office held				

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printing	epayment/Reinbursement       Solicitation/Fundraising Expense         overhead/Rental Expense       Transportation Equipment & Related Expense         Expense       Travel in District         Expense       Travel Out of District         S/Wages/Contract Labor       OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 5/8 Rpt: 37/41	2 FILER NAME Martinez, Elizabeth R.	3 Filer ID (Ethics Commission Filers) 00087602			
4 Date 11/16/2024	5 Payee name NorthWest Democrats				
6 Amount (\$) \$10.00 Reimbursement from political contributions intended	<ul> <li>7 Payee address; City; State; Zip C</li> <li>P.O. Box 681911</li> <li>San Antonio , TX 78268</li> </ul>	Code			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Check if travel outside of Texas. Complete Schedule T.			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Date	Payee name				
09/12/2024					
Amount (\$) \$12.41 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 23801 Calabasas Road Ste 2005 Calabasas, CA 91302				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photo Prints			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit				
Date 10/01/2024	Payee name PlanetArt, LLC				
Amount (\$) \$13.91	Payee address; City; State; Zip C 23801 Calabasas Road	Code			
Reimbursement from political contributions intended	Ste 2005 Calabasas, CA 91302				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Pictures			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EX	PENDITURES FROM PERSON	IAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	epayment/Reinbursement     Solicitation/Fundraising Expense       verhead/Rental Expense     Transportation Equipment & Related Expense       Expense     Travel in District       Expense     Travel Out of District       /Wages/Contract Labor     OTHER (enter a category not listed above)			
1 Total pages Schedule G: Sch: 6/8 Rpt: 38/41	2 FILER NAME Martinez, Elizabeth R.	<b>3</b> Filer ID (Ethics Commission Filers) 00087602			
4 Date 08/21/2024	5 Payee name San Antonio Bar Assocation				
6 Amount (\$) \$35.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code PO BOX 821165 San Antonio , TX 78283				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ticket to SABA Meeting and Past Presidents Reception			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Office sought Office held				
Date 07/17/2024	Payee name 024 San Antonio Black Lawyers Assoc.				
Amount (\$) \$300.00 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 00 P.O. Box 831202 San Antonio , TX 78283				
PURPOSE OF EXPENDITURE	OF Check if Austin, TX, officeholder I				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit				
Date 10/03/2024 Amount (\$)	Payee name San Antonio Young Lawyers Association Payee address; City; State; Zip C	Code			
\$65.00 Reimbursement from political contributions intended	PO BOX 6344 San Antonio , TX 78209				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Judicial Jamboree			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing I	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1 Total pages Schedule G: Sch: 7/8 Rpt: 39/41	2 FILER NAME Martinez, Elizabeth R.	3	Filer ID (Ethics Commission Filers) 00087602		
4 Date 07/25/2024	5 Payee name State Bar of Texas - Texas Bar College	ľ			
6 Amount (\$) \$75.00 Reimbursement from political contributions	7 Payee address; City; State; Zip Code PO Box 12487				
B     PURPOSE	Austin, TX 78711 (a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	Dues for Texas Bar College		Check if Austin, TX, officeholder living expense ar College		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 10/14/2024					
Amount (\$) \$75.55 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Stamps	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	expenditure to benefit				
Date 12/17/2024	Payee name United States Postal Service				
Amount (\$) \$73.00	Payee address; City; State; Zip C 2400 McCullough Ave.	ode			
X Reimbursement from political contributions intended	San Antonio , TX 78212				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Stamps	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Officeholder name	I Office sought	Office held		

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Git/Awards/Memorials Expense Printing E	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 8/8 Rpt: 40/41	2 FILER NAME Martinez, Elizabeth R.		<b>3</b> Filer ID (Ethics Commission Filers) 00087602			
4	Date 12/17/2024	5 Payee name Walmart					
6	Amount (\$) \$41.57 Reimbursement from political contributions		ode				
	intended	San Antonio , TX 78216					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description [ [ Invitations	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	I Candidate/Officeholder name	Office sought	Office held			

# INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instruction Guide explains how to complete this form.				ages Schedule K: /1 Rpt: 41/41		
2	P FILER NAME 3 Fil			Filer ID	• (Ethics Commiss	ion Filers)	
	Martinez, Elizabeth R. 00087			602			
4	Date 5 Name of person from whom amount is received				8 Amount (\$)		
	12/26/2024		Anedot				\$0.34
		6	Address of person from whom amount is received; City; State; Zip Code			•	
			Dallas , TX 75201				
		7	<u> </u>	oliti	cal conti	ribution returned to f	iler
			Fee charged from Anedot for S. Daugherty refund				
	Date		Name of person from whom amount is received			Amount (\$)	
	12/26/2024		Daugherty , Sigurd				\$0.66
		·····	Address of person from whom amount is received; City; State; Zip Code				
			South Schuyler , KS 60857-0000				
			Purpose for which amount is received X Check if p	oliti	cal conti	ribution returned to f	iler
			This person is unknown to me therefore I voided the transaction shortly after	r m	ade.		
	Date		Name of person from whom amount is received			Amount (\$)	
	10/21/2024		Leadership for Educational Equity				\$580.00
			Address of person from whom amount is received; City; State; Zip Code				
			Washington, DC 20001				
			Purpose for which amount is received	oliti	cal conti	ribution returned to f	iler
			Refund of Balance				
	Date		Name of person from whom amount is received			Amount (\$)	
	12/31/2024		Thomas J. Henry Law PLLC				\$5,000.00
		·····	Address of person from whom amount is received; City; State; Zip Code			•	
			San Antonio , TX 78269-0000				
			<u> </u>	oliti	cal conti	ribution returned to f	iler
			Returned 5K of 10K - by Check				
	Date		Name of person from whom amount is received			Amount (\$)	
	12/31/2024		Thomas J. Henry Law PLLC				\$5,000.00
		Address of person from whom amount is received; City; State; Zip Code					
			San Antonio , TX 78269-0000				
Purpose for which amount is received Check if political contribution r				ribution returned to f	iler		
			Cashiers Check for Returned Contribution				