CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Comm 0008423		2 Total pages file 6	
3 CANDIDATE /	MS / MRS / MR	FIRST	•	MI		JSE ONLY
OFFICEHOLDER	The Honorable	Claudia				
NAME					Date Received	
					ELECTRONICA	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025	
		Ordaz Perez				
			T \/.		Date Hand-delivered or	· Data Bastmarkad
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	T/SUITE#; CI	ΙΥ;	ZIP CODE	Date Hand-delivered of	Date Postinarkeu
MAILING	P.O. Box 71738				Receipt #	Amount
ADDRESS					Receipt #	Amount
Change of Address	El Paso, TX 79917				Data Dragogad	
					Date Processed	
					Data Imaged	
					Date Imaged	
5 CAMPAIGN	MS/MRS/MR	FIRST		MI		
TREASURER				IVII		
NAME	Mrs.	Terri				
	NICKNAME	LAST		SUFFIX		
		Flickinger				
6 CAMPAIGN	STREET ADDRESS (NO P	O BOX PLEASE);	AF	T / SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER	8120 Bethany Dr.	<i>,</i> ,				
ADDRESS						
(Residence or Business)						
	El Paso, TX 79925					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION			
TREASURER			EXTENSION			
PHONE	(915) 276-5158					
8 REPORT TYPE	X January 15	30th day befor		Runoff	15th day after car	nnaign treasurer
	X January 15	Sour day belor		Runon	appointment (offic	
	July 15	8th day before	election	Exceeded modified	Final Report (Atta	ch C/OH-FR)
				reporting limit	-	
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	07/01/2024	Т	HROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		Primary	Runoff	Other	
	11/05/2024		-			
		X	General	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)	
	State Representative Dis	strict 79 El Paso		State Represent	ative District 79	
	1			1		
	GO TO PAGE 2					
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	JS	Versio	on V4.1.0.5dd2ace2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2 2 of 66

13 C / OH NAME	Ordaz Perez, Claudia	a (The Honorable)	14 Filer ID 00084239	(Ethics Commission Filers)	
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendit These expenditures may have been made without d officeholders are required to report this information	the candidate's or offic	ceholder's knowledge or	
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL				
		COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAES OF LOANS, OR CONTRIBUTIONS MADE ELE		, \$ 0.00	
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 72,498.00	
EXPENDITURE TOTALS				\$ 0.00	
	4. TOTAL POLITICAL EXPENDITURES				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE RIOD	LAST DAY OF THE	\$ 86,657.63	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS	S OF THE LAST DAY	\$ 0.00	
17 AFFIDAVIT					
		I swear, or affirm, under penal true and correct and includes under Title 15, Election Code.			
		The Hener	able Claudia Ordaz F	Poroz	
			of Candidate or Officeho		
	TARY STAMP / SEAL AB				
		aid	, this the	day	
01	, 20, 10 C	enny which, whiess my hand and sear of once.			
Signature of offic	cer administering	Printed name of officer administering	Title of office	er administering oath	
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2	

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 66 19 Filer ID 18 FILER NAME (Ethics Commission Filers) Ordaz Perez, Claudia (The Honorable) 00084239 **20** SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. \$ 72,200.00 2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 298.00 \$ SCHEDULE B: PLEDGED CONTRIBUTIONS \$ З. 4. SCHEDULE E: LOANS \$ 5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 22,108.42 \$ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ 7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD 8. \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 11. \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. \$ TO FILER

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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/16 Rpt: 4/66	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
-		z, Claudia (The Honorable)			00084239	///////////////////////////////////////
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/15/2024	512 Strategies LLC				\$500.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78731				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
_			I			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/14/2024	American Pharmacy Inc GPAC				\$500.00
		Contributor address; City; State; Zip Code				
		Corpus Christi, TX 78401				
-	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
_	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	10/15/2024	Ancira Strategic Partners LLP				\$400.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
			l			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	08/23/2024	Associated General Contractors of Texas				\$2,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78768				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
			I			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/30/2024	Borsch, Gary (Mr.)				\$500.00
		Contributor address; City; State; Zip Code	1			
		El Paso, TX 79912				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	;)		
			<u> </u>			

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/16 Rpt: 5/66	
2	FILER NAME Ordaz Perez	z, Claudia (The Honorable)		3	Filer ID (Ethics Commission 00084239	on Filers)
4		· · ·		Ļ		
4	Date 10/30/2024	5 Full name of contributor out-of-state PAC (ID#: Bowling, Bobby (Mr.)		ľ	Amount of Contribution (\$)	\$5,000.00
		6 Contributor address; City; State; Zip Code				
		El Paso, TX 79912				
8	Principal occu Owner	ipation / Job title (See Instructions)	9 Employer (See Instructions Tropicana Homes	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/30/2024	Bowling, Randy (Mr.)				\$5,000.00
						• •
		El Paso, TX 79912				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Owner		Tropicana Homes			
	Date	Full name of contributor out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	08/15/2024	Brotherhood of Locomotive Engineers & Trainme	en TXPAC			\$500.00
	Principal occu	Decatur, TX 76234 upation / Job title (See Instructions)	Employer (See Instructions	 ۱		
		!	<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	·
	12/05/2024					\$500.00
		Contributor address; City; State; Zip Code Austin, TX 78731				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
	T Thiopan corr.			')		
	Date	Full name of contributor Out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/19/2024	Chevron Employees PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		San Ramon, CA 94583				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
			<u> </u>			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 3/16 Rpt: 6/66	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	r, Claudia (The Honorable)		00084239	,
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
10/15/2024	Delgadillo, Danielle			\$250.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78731			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions Self	s)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/13/2024	El Paso Electric Company Employee PAC			\$1,000.00
	Contributor address; City; State; Zip Code			
	El Paso, TX 79960			
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/25/2024	Enterprise Holdings PAC			\$500.00
	Contributor address; City; State; Zip Code			
D in single age	St. Louis, MO 63105		<u> </u>	
Principai occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/30/2024	Gaddy, Lane (Mr.)			\$1,000.00
	Contributor address; City; State; Zip Code			
	El Paso, TX 79902			
	pation / Job title (See Instructions)	Employer (See Instructions	\$)	
CEO		W Silver Recycling		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
12/05/2024	Goldean, Paul (Mr.)			\$1,000.00
	Contributor address; City; State; Zip Code			
	Charlotte, NC 28277	1		
-	upation / Job title (See Instructions)	Employer (See Instructions	\$)	
Executive		PaceOMatic		

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/16 Rpt: 7/66	
2 FILER NAME			3	Filer ID (Ethics Commission	n Filers)
Ordaz Perez	z, Claudia (The Honorable)			00084239	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
10/14/2024	Grace & McEwan Consulting LLC				\$250.00
ļ	6 Contributor address; City; State; Zip Code		1		
	Austin, TX 78701				
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	3)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
11/13/2024	HCA Texas Good Government Fund				\$500.00
	Contributor address; City; State; Zip Code		1		
	Dallas, TX 75240	-			
Principal occur	upation / Job title (See Instructions)	Employer (See Instructions	3)		
		<u> </u>			
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/30/2024	Haggerty, Patrick				\$250.00
	Contributor address; City; State; Zip Code	,	1		
	El Paso, TX 79904		Ļ		
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
		<u> </u>	=		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	+=>0.00
10/09/2024	Hill Co PAC				\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78701				
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	=)		
ΓΠισμαι σουα			<i></i> ,		
		<u> </u>	—		
Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
12/05/2024	Hoffman, Blake				ΦΟΟΟΟΟ
	Contributor address; City; State; Zip Code				
	Talking Rock, GA 30175				
Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>ال</u>		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/16 Rpt: 8/66	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		z, Claudia (The Honorable)		Ĺ	00084239	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/29/2024	Houston Pilots PAC				\$1,000.00
		6 Contributor address; City; State; Zip Code		1		
		Deer Park, TX 77536				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
			I			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/30/2024	Hughes, Lisa				\$300.00
		Contributor address; City; State; Zip Code		ł		
		Austin, TX 78759				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
			I			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/22/2024	Hunt, Woody (Mr.)				\$2,500.00
		Contributor address; City; State; Zip Code		ł		
		El Paso, TX 79901				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Chairman		Hunt Companies			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/30/2024	Jimenez, Demetrio (Mr.)				\$1,000.00
		Contributor address; City; State; Zip Code		ł		
		- · ·				
		El Paso, TX 79922				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	President		Tropicana Homes			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/02/2024	Laredo Fire PAC				\$500.00
		Contributor address; City; State; Zip Code		1		
		- · ·				
		Laredo, TX 78041				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/16 Rpt: 9/66	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
_		z, Claudia (The Honorable)			00084239	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/03/2024	Lee A. Woods Political Action Committee				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Austin, TX 78701				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/11/2024	Linebarger Goggan Blair & Sampson				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78760				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
		1				
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/30/2024	Lisa, Peisen				\$1,500.00
		Contributor address; City; State; Zip Code				
		El Paso, TX 79922				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
	Self-employe	ed	L&F Distributors			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/15/2024	Longbow Partners				\$350.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	;)		
		1				
	Date	Full name of contributor X out-of-state PAC (ID#: C	C00496307)	Γ	Amount of Contribution (\$)	
	09/23/2024	Marathon Petroleum Corporation PAC				\$1,000.00
		Contributor address; City; State; Zip Code				
		Findlay, OH 45840				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	ـــــــــــــــــــــــــــــــــــــ		
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The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A1: Sch: 7/16 Rpt: 10/66	
2 FILER NAME			3 Filer ID (Ethics Commission	on Eilers)
	z, Claudia (The Honorable)		00084239	
4 Date	5 Full name of contributor X out-of-state PAC (ID#:	C00225342)	7 Amount of Contribution (\$)	
10/23/2024	McGuire Woods Federal PAC Fund			\$500.00
	6 Contributor address; City; State; Zip Code			
	Richmond, VA 23219			
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions))	
Date	Full name of contributor X out-of-state PAC (ID#:	C00097485)	Amount of Contribution (\$)	
09/19/2024	Merck Employees PAC	,		\$1,000.00
00/10/2021				<i>41,000.00</i>
	Contributor address; City; State; Zip Code			
	Mashington DO 00004			
	Washington, DC 20004			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/15/2024	Meyers, Lucas			\$250.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78759			
Principal occu	I upation / Job title (See Instructions)	Employer (See Instructions))	
		, . ,	,	
Date	Full name of contributor out-of-state PAC (ID#:	\	Amount of Contribution (\$)	
09/10/2024	NAIFA Texas IFAPAC)		\$500.00
09/10/2024				\$500.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78746			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions))	
Date	Full name of contributor X out-of-state PAC (ID#:_	C00491696)	Amount of Contribution (\$)	
08/23/2024	NRG Energy PAC			\$2,000.00
	Contributor address; City; State; Zip Code			
	Princeton , NJ 08540-6213			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	
Fincipal occu)	
		1		

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 8/16 Rpt: 11/66
2 FILER NAME Ordaz Perez	z, Claudia (The Honorable)		3 Filer ID (Ethics Commission Filers) 00084239
4 Date 08/21/2024	5 Full name of contributor out-of-state PAC (ID#: ONE Gas, Inc PAC		7 Amount of Contribution (\$)\$750.00
	6 Contributor address; City; State; Zip Code		
	Tulsa, OK 74103		
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	\$)
Date 09/26/2024	Full name of contributor x out-of-state PAC (ID#: Organon & Co. Employee PAC Contributor address; City; State; Zip Code	200780171)	Amount of Contribution (\$) \$500.00
Principal occu	Washington, DC 20001 pation / Job title (See Instructions)	Employer (See Instructions	\$)
_			
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/30/2024	Osborn, David (Mr.) Contributor address; City; State; Zip Code		\$500.00
	El Paso, TX 79912		
Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions West Star Bank	<u></u>
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
12/05/2024	Pascal, Matt Contributor address; City; State; Zip Code		\$500.00
	Hudson, CO 80642		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	\$)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
10/01/2024	Political Action Committee of the Independent In Contributor address; City; State; Zip Code		\$250.00
	Austin, TX 78768		
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	3)

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 9/16 Rpt: 12/66	
2 FILER NAME			3 Filer ID (Ethics Commission	on Filers)
	r, Claudia (The Honorable)		00084239	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
12/09/2024	Red Rock Texas PAC			\$500.00
	6 Contributor address; City; State; Zip Code			
	Austin, TX 78701			
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
Date	Full name of contributor Out-of-state PAC (ID#:	<u> </u>	Amount of Contribution (\$)	
)	Amount of Contribution (\$)	¢500.00
11/26/2024	Sabine Pilot PAC			\$500.00
	Contributor address; City; State; Zip Code			
	Port Arthur, TX 77640			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	6)	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
10/30/2024	Schwartz, Douglas			\$2,500.00
	Contributor address; City; State; Zip Code			
	El Paso, TX 79922			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Real Estate	Developer	Southwest Land Develo	pment Services Inc	
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
10/30/2024	Schwartz, Stuart (Mr.)			\$250.00
	Contributor address; City; State; Zip Code			
	El Paso, TX 79912			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
Attorney		Scott Hulse		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)	
09/30/2024	TBA Bank PAC			\$1,000.00
03/30/2024				φ1,000.00
	Contributor address; City; State; Zip Code			
	Austin, TX 78701			
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
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	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/16 Rpt: 13/66	
2	FILER NAME			3	Filer ID (Ethics Commission) Filers)
[, Claudia (The Honorable)			00084239	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/14/2024	TENET Healthcare Corporation			\$250.00	
		6 Contributor address; City; State; Zip Code	1			
		Dallas, TX 75254				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/11/2024	Texans for Reasonable Solutions PAC				\$500.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78741				
	Principal occu	pation / Job title (See Instructions)	<u>ا</u>			
			Employer (See Instructions	-)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/14/2024	Texas AFL-CIO State Cope Fund				\$500.00
		Austin, TX 78711				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/10/2024	Texas Association of Builders				\$750.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Data				Amount of Contribution (*)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	Φ Ε ΩΩ ΩΩ
	10/02/2024	Texas Association of Crane Owners PAC				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78716				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/16 Rpt: 14/66	
2 FILER NAME Ordaz Perez	r, Claudia (The Honorable)		3	Filer ID (Ethics Commission 00084239	on Filers)
4 Date 10/08/2024	5 Full name of contributor Out-of-state PAC (ID#: Texas Dairymen PAC		7	Amount of Contribution (\$)	\$500.00
	6 Contributor address; City; State; Zip Code				
	Austin, TX 78711				
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	3)		
Date 08/05/2024	Full name of contributor out-of-state PAC (ID#:	•	Amount of Contribution (\$)	\$100.00	
Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
			<u> </u>		
Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	. – – – – – – –
10/10/2024	Texas Dental Association PAC Contributor address; City; State; Zip Code				\$500.00
	Austin, TX 78704				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	3)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
12/04/2024	Texas Friends of Trey Martinez Fischer				\$2,000.00
	Contributor address; City; State; Zip Code				
	San Antonio, TX 78201				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
11/25/2024	Texas Land Title Association PAC				\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78703				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	5)		

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/16 Rpt: 15/66	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		z, Claudia (The Honorable)		L	00084239	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/15/2024	Texas Lobby Partners LLP				\$1,000.00
	I	6 Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	5)			
=	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/06/2024	Texas McDonalds Operators Association PAC			,	\$1,000.00
		Contributor address; City; State; Zip Code		1		+_,
		Athens, TX 75751				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/05/2024	Texas Realtors PAC				\$2,500.00
	I	Contributor address; City; State; Zip Code				
		Austin TV 70760				
	Dringinal occu	Austin, TX 78768 Ipation / Job title (See Instructions)	Employer (See Instructions)			
	Ρπιοραί στου			り		
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/01/2024	Texas Sands PAC				\$4,000.00
	1	Contributor address; City; State; Zip Code				
		1				
⊢	Dringinal occu	Austin, TX 78701	Employer (Soo Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)))		
╞╴	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/06/2024	Texas Society of Architects Committee				\$1,000.00
	I	Contributor address; City; State; Zip Code				
		1				
		Austin, TX 78702				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
L						

	ction Guide explains how to	complete this for	rm.		Fotal pages Schedule A1: Sch: 13/16 Rpt: 16/66	
2 FILER NAME				Filer ID (Ethics Commissio	on Filers)	
Ordaz Perez	z, Claudia (The Honorable)			00084239		
4 Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 /	Amount of Contribution (\$)	
10/04/2024	04/2024 Texas State Association of Fire Fighters Action Committee					\$750.00
	6 Contributor address; City; State	; Zip Code				
	Austin, TX 78701					
8 Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
Date	Full name of contributor	out-of-state PAC (ID#:)	4	Amount of Contribution (\$)	
11/18/2024	Texas State Teachers Assoc				\$500.00	
	Contributor address; City; State					
	Austin, TX 78759					
Principal occu	I pation / Job title (See Instructions)	I;)				
	•		Employer (See Instructions	,		
Date	Full name of contributor	out-of-state PAC (ID#:)	4	Amount of Contribution (\$)	
10/08/2024	Texas Trial Lawyers Associa				\$1,000.00	
	Contributor address; City; State					
		, <u> </u>				
	Austin, TX 78701					
Principal occu	Austin, TX 78701 Ipation / Job title (See Instructions)		Employer (See Instructions	;)		
Principal occu			Employer (See Instructions	;)		
Principal occu Date	pation / Job title (See Instructions)	out-of-state PAC (ID#:	Employer (See Instructions		Amount of Contribution (\$)	
	pation / Job title (See Instructions)		Employer (See Instructions		Amount of Contribution (\$)	\$1,500.00
Date	pation / Job title (See Instructions)	ation PAC	Employer (See Instructions		Amount of Contribution (\$)	\$1,500.00
Date	Full name of contributor	ation PAC	Employer (See Instructions		Amount of Contribution (\$)	\$1,500.00
Date	Full name of contributor	ation PAC	Employer (See Instructions		Amount of Contribution (\$)	\$1,500.00
Date	Full name of contributor	ation PAC	Employer (See Instructions		Amount of Contribution (\$)	\$1,500.00
Date 11/19/2024	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State	ation PAC	Employer (See Instructions		Amount of Contribution (\$)	\$1,500.00
Date 11/19/2024	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State Austin, TX 78701	ation PAC)		Amount of Contribution (\$)	\$1,500.00
Date 11/19/2024	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State Austin, TX 78701	ation PAC)))	Amount of Contribution (\$)	\$1,500.00
Date 11/19/2024 Principal occu	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State Austin, TX 78701 Ipation / Job title (See Instructions)	ttion PAC ; Zip Code out-of-state PAC (ID#:)))		\$1,500.00
Date 11/19/2024 Principal occu Date	Full name of contributor	ttion PAC ; Zip Code ; out-of-state PAC (ID#: mittee)))		
Date 11/19/2024 Principal occu Date	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State Austin, TX 78701 upation / Job title (See Instructions) Full name of contributor Textron Political Action Comm	ttion PAC ; Zip Code ; out-of-state PAC (ID#: mittee)))		
Date 11/19/2024 Principal occu Date	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State Austin, TX 78701 upation / Job title (See Instructions) Full name of contributor Textron Political Action Comm	ttion PAC ; Zip Code ; out-of-state PAC (ID#: mittee)))		
Date 11/19/2024 Principal occu Date	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State Austin, TX 78701 upation / Job title (See Instructions) Full name of contributor Textron Political Action Comm	ttion PAC ; Zip Code ; out-of-state PAC (ID#: mittee)))		
Date 11/19/2024 Principal occu Date 09/20/2024	Full name of contributor Texas Trial Lawyers Associa Contributor address; City; State Austin, TX 78701 upation / Job title (See Instructions) Full name of contributor Textron Political Action Communication Contributor address; City; State	ttion PAC ; Zip Code ; out-of-state PAC (ID#: mittee)) (;;)		

				_		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/16 Rpt: 17/66	
2	FILER NAME		+	3	Filer ID (Ethics Commissio	on Filers)
		r, Claudia (The Honorable)			00084239	- ,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/04/2024	The Cigna Group Employee PAC	ļ			\$500.00
		6 Contributor address; City; State; Zip Code		1		
		Philadelphia, PA 19192				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	;)		
-	Date	Full name of contributor X out-of-state PAC (ID#:	C00284885		Amount of Contribution (\$)	
	10/04/2024	The Home Depot PAC		Allount of Contribution (*)	\$1,000.00	
	10/04/2021			ł		Ψ1,000.00
		Contributor address; City; State; Zip Code	ļ			
		Washington, DC 20004				
	Principal occu	pation / Job title (See Instructions)	5)			
	Date	Full name of contributor X out-of-state PAC (ID#:	C00010470)	Γ	Amount of Contribution (\$)	
	09/10/2024	Union Pacific Corporation Fund for Effective Gov				\$2,000.00
		Contributor address; City; State; Zip Code		1		
		Washington, DC 20004				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		
L			<u> </u>	—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/27/2024	Verizon Communications Inc				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
	Principal occl	I Ipation / Job title (See Instructions)	Employer (See Instructions)	上 3)		
	·					
-	Date	Full name of contributor out-of-state PAC (ID#:) <u> </u>	Γ	Amount of Contribution (\$)	
	12/02/2024	Veterinarian PAC				\$500.00
		Contributor address; City; State; Zip Code		ł		
		Austin, TX 78754	1	L		
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		

The Instrue	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/16 Rpt: 18/66	
2 FILER NAME Ordaz Perez	z, Claudia (The Honorable)		3	Filer ID (Ethics Commission 00084239	on Filers)
4 Date 10/16/2024	5 Full name of contributor out-of-state PAC (ID#: Villarreal, Massey		7	Amount of Contribution (\$)	\$1,000.00
	6 Contributor address; City; State; Zip Code				
	Sugar Land, TX 77479		Ĺ		
8 Principal occu Business Ow		9 Employer (See Instructions) PTF	;)		
Date 10/09/2024	Full name of contributor out-of-state PAC (ID#: Weekley, Richard (Mr.) Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,500.00	
Principal occu	Houston, TX 77055 pation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>		
Homebuilder		Weekley Homes	<i>י</i> י		
Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
10/30/2024	Wilson, Joyce Contributor address; City; State; Zip Code				\$200.00
	El Paso, TX 79912				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
Date 10/30/2024	Full name of contributor out-of-state PAC (ID#: Wingo, Bob (Mr.)			Amount of Contribution (\$)	\$250.00
	Contributor address; City; State; Zip Code				
	El Paso, TX 79912				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	;)		
Date 10/31/2024	Full name of contributor out-of-state PAC (ID#: Yellen, Tracy)	[Amount of Contribution (\$)	\$100.00
	Contributor address; City; State; Zip Code				
	El Paso, TX 79902				
Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	;)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 16/16 Rpt: 19/66 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Ordaz Perez, Claudia (The Honorable) 00084239 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 10/18/2024 \$500.00 Zachry Corporation PAC 6 Contributor address; City; State; Zip Code San Antonio, TX 78265 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/30/2024 \$1,500.00 Zamora, Richard (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78260 Principal occupation / Job title (See Instructions) Employer (See Instructions) VP Dannenbaum Engineering

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

	The Instru	iction Guide explains how to complete this f	1	1 Total pages Schedule A2: Sch: 1/1 Rpt: 20/66				
2	FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Ordaz Perez	z, Claudia (The Honorable)			00084239			
4	TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	\$					
5	Date 10/15/2024	 Full name of contributor out-of-state PAC (ID#: Sampson, Chance Contributor address; City; State; Zip Code Austin, TX 78701)	8	Amount of 9 In-kind contribution contribution (\$) 6escription \$298.00 Fundraiser host			
10	Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JU	Check if travel outside of Texas. Complete Schedule T.			
12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's					OR JUDICIAL) (See instructions)			
14	Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's	spouse (if any) (FOR JUDICIAL)			
16	If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Co Credit Card Payment			Fees Office Overhead/Rental Expense Transportation Equipm Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District					
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 1/46 Rpt: 21/66	00084239						
4	Date5Payee name07/26/202468 Degrees							
6	6 Amount (\$) 7 Payee address; City; State; Zip Code \$181.52 2401 Lake Austin Blvd Austin, TX 78703							
8	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. Check if Austin, TX, officeholder living expense Staff meeting							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office soug	ht		Office held
	Date	F	ayee name					
	07/01/2024	/	AT&T					
	Amount (\$)Payee address;City;State;Zip Code\$173.25208 S. Akard St							
		[Dallas, TX 75202					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at Dffice Overhead/Rental Ex		nedule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice soug	ht		Office held
	Date	F	Payee name					
	08/01/2024		AT&T					
	Amount (\$) \$145.37		Payee address; City; 208 S. Akard St	State;	; Zip Coo	le		
			Dallas, TX 75202					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at Office Overhead/Rental Ex		iedule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhead/Rental Expense Transportat Food/Beverage Expense Polling Expense Travel in Di - Gift/Awards/Memorials Expense Printing Expense Travel Out				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 F		•		•	3	Filer ID (Ethics Commission Filers)
-	Sch: 2/46 Rpt: 22/66		rdaz Perez, Claudia (The Ho	00084239				
4	Date 10/01/2024	5 Payee name AT&T						
6	6 Amount (\$) \$157.09 7 Payee address; City; State; Zip Code 208 S. Akard St Dallas, TX 75202							
8	8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense PURPOSE Phone Bill							
9	9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						Office held	
	Date	P	ayee name					
11/15/2024 AT&T								
	Amount (\$) Payee address; City; State; Zip Code \$322.31 208 S. Akard St Dallas, TX 75202							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the tr ffice Overhead/Rental Exper		edule)			de of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office held
	Date	Р	ayee name					
	09/01/2024		T&T					
	Amount (\$) \$173.25		ayee address; City; 08 S. Akard St	State;	Zip Coc	e		
		D	allas, TX 75202					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t ffice Overhead/Rental Expe		edule)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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: 3/46 Rpt: 23/66	Ordaz Perez, Claudia (The Honorable) 00084239							
4	Date 12/02/2024	5 Payee name AT&T							
6	6 Amount (\$) \$180.56 7 Payee address; City; State; Zip Code 208 S. Akard St Dallas, TX 75202								
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if Austin, TX, officeholder living expense Phone Bill Check if Austin, TX, officeholder living expense Phone Bill								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	07/24/2024	Airbnb Headquarters							
	Amount (\$)Payee address;City;State; Zip Code\$246.94888 Brannan St								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense Istin						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/11/2024	Airbnb Headquarters							
	Amount (\$) \$549.20	Payee address; City; State; Zip Code 888 Brannan St							
		San Fransisco, CA 94103							
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. . TX, officeholder living expense IStin						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee	Fees Office Overhead/Rental Expense Transpor Food/Beverage Expense Polling Expense Travel in Gift/Awards/Memorials Expense Printing Expense Travel O				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: 4/46 Rpt: 24/66							
4	Date 5 Payee name 10/13/2024 Airbnb Headquarters							
6	Amount (\$) 7 Payee address; City; State; Zip Code \$320.55 \$888 Brannan St San Fransisco, CA 94103							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense Image: Check if Austin, TX, officeholder living expense						, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candida	te/Officeholder name	C	Office soug	nt		Office held
	Date	Payee	name					
	07/10/2024	Airbnb	Headquarters					
	Amount (\$)Payee address;City;State;Zip Code\$436.11888 Brannan St							
	DUDDOGE		ransisco, CA 94103					
	PURPOSE OF EXPENDITURE		ory (See Categories listed at the Overhead/Rental Expe		iedule) (ı, ТХ,	ide of Texas. Complete Schedule T. K, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candida	te/Officeholder name	C	Office soug	nt		Office held
	Date	Payee	name					
	12/19/2024	Amaz	on					
	Amount (\$) \$103.78		address; City; x 81226	State;	; Zip Cod	2		
		Seattle	e, WA 98108					
	PURPOSE OF EXPENDITURE		Dry (See Categories listed at the Overhead/Rental Expe		edule) (ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candida	te/Officeholder name	C	Office soug	nt		Office held

	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/M	pense pense pens (pens /ages	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	· · · · · ·	101.12 -			3	Filer ID (Ethics Commission Filers)	
1	Sch: 5/46 Rpt: 25/66		Ordaz Perez, Claudia (The Honorable))			3	00084239	
4	Date	5	Payee name						
	12/19/2024		Amazon						
6	Amount (\$) \$14.06		Payee address; City; State PO Box 81226 Seattle, WA 98108	; Zip Co	de				
_	DUDDOCE	<u> </u>			(1-)				
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	nedule)	(D)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name (Office sou	ght			Office held	
	Date		Payee name						
	12/19/2024		Amazon						
	Amount (\$)		Payee address; City; State	; Zip Co	de				
	\$48.66		PO Box 81226 Seattle, WA 98108						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	nedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name (Office sou	ght			Office held	
	Date		Payee name						
	12/31/2024		Amazon						
	Amount (\$) \$503.09		Payee address; City; State PO Box 81226	; Zip Co	de				
			Seattle, WA 98108						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	nedule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ght			Office held	

			EXPENDITURE CAT	EGORIES FOR	R BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fee Foo Gif nmittee Leg	ent Expense es od/Beverage Expense //Awards/Memorials Expense gal Services ne Instruction Guide exp	Office Ove Polling Ex Printing E Salaries/V	xpense Vages/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:					3 Filer ID (Ethics Commission Filers)
	Sch: 6/46 Rpt: 26/66		Claudia (The Hono	rable)		00084239
4	Date 12/27/2024	Payee name Amazon				
6	Amount (\$) \$378.86	Payee address; PO Box 81226 Seattle, WA 9	5	State; Zip Co	ode	
8	PURPOSE OF EXPENDITURE		Categories listed at the top of ad/Rental Expense	this schedule)		outside of Texas. Complete Schedule T. n, TX, officeholder living expense ISES
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officel	nolder name	Office sou	ight	Office held
	Date	Payee name				
	10/01/2024	American Airli	nes			
	Amount (\$) \$193.98	Payee address; P.O. Box 6196 DFW Airport,	516	State; Zip Co	ode	
	PURPOSE OF EXPENDITURE		Categories listed at the top of ad/Rental Expense	this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense e fee for legislative trip in Mexico
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officel	nolder name	Office sou	ight	Office held
	Date	Payee name				
	10/04/2024	American Airli	nes			
	Amount (\$) \$138.98	Payee address; P.O. Box 6196		State; Zip Co	ode	
		DFW Airport,	TX 75261			
	PURPOSE OF EXPENDITURE		Categories listed at the top of ad/Rental Expense	this schedule)	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense e fee for legislative trip in Mexico
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officel	nolder name	Office sou	ight	Office held

	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 E ittee Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense	
1	Total pages Schedule F1:	2 F				<u> </u>	3	Filer ID	(Ethics Commission Filers)	
-	Sch: 7/46 Rpt: 27/66		rdaz Perez, Claudia (The H	onorable)			ľ	00084239		
4	Date 09/13/2024		ayee name ustin International Airport							
6	Amount (\$) \$19.92	3	ayee address; City; 600 Presidential Blvd ustin, TX 78719	State;	Zip Coo	e				
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the ood/Beverage Expense	top of this sche	edule)			de of Texas. Comp officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office he	ld	
	Date	Р	ayee name							
	10/17/2024	A	ustin International Airport							
	Amount (\$) \$43.82		ayee address; City; 600 Presidential Blvd	State;	Zip Coo	е				
		A	ustin, TX 78719							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the ood/Beverage Expense	top of this sche	edule)			de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office he	ld	
	Date	Р	ayee name							
	12/31/2024	В	est Buy Austin							
	Amount (\$) \$2,116.45		ayee address; City; 201 Barbara Jordan Blvd	State;	Zip Coo	е				
			ustin, TX 78723							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the office Overhead/Rental Expe		edule)		n, TX,	de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office soug	ht		Office he	ld	

	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 nmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Exp 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			-	3	Filer ID (Ethics Commission Filers)			
	Sch: 8/46 Rpt: 28/66		Ordaz Perez, Claudia (The Honorable)				00084239			
4	Date	5	Payee name							
	10/07/2024		Café Toscano Polanco							
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de					
	\$139.79		Temístocles 26							
	Mexico City 11550 Mexico									
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	adula)	(b) Description					
-	OF		Food/Beverage Expense	edule)		outs	ide of Texas. Complete Schedule T.			
	EXPENDITURE				Check if Austin	n, TX	, officeholder living expense			
					Meeting in M	exi	co during legislative trip			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office sou	ght		Office held			
╞										
	Date		Payee name							
	08/02/2024		Chevron Austin							
	Amount (\$) Payee address; City; State; Zip Code									
	\$19.74		1200 N Lamar Blvd							
			Austin, TX 78701							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
	OF EXPENDITURE		Travel Out of District	,	Check if travel	outs	ide of Texas. Complete Schedule T.			
	EXPENDITORE					n, TX	, officeholder living expense			
					Gas					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held			
		_								
	Date		Payee name							
	08/02/2024		Chevron Austin							
	Amount (\$)		Payee address; City; State;	Zip Co	de					
	\$48.92		1200 N Lamar Blvd							
			Austin, TX 78701							
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description					
OF Travel Out of District							ide of Texas. Complete Schedule T.			
						ı, TX	, officeholder living expense			
Gas										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office sou	yni		Office held			

	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 Inmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp 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			•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 9/46 Rpt: 29/66		Ordaz Perez, Claudia (The Honorable)			ľ	00084239			
4	Date 07/20/2024		Payee name Circle K							
6	Amount (\$) \$55.56		Payee address; City; State; 1520 Lee Trevino Dr El Paso, TX 79936	Zip Co	le					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel In District	edule)			de of Texas. Complete Schedule T. officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ıht		Office held			
	Date		Payee name							
	09/06/2024		Circle K							
	Amount (\$) \$25.74		3112 E Cesar Chavez St	Zip Co	le					
	PURPOSE OF EXPENDITURE	(a)	Austin, TX 78702 Category (See Categories listed at the top of this sche Travel Out of District	edule)			de of Texas. Complete Schedule T. officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Office sou	ıht		Office held			
	Date		Payee name							
	12/30/2024		Delta Airlines							
	Amount (\$) \$29.99		Payee address; City; State; 1030 Delta Boulevard	Zip Co	le					
			Atlanta, GA 30354							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Fees	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense Ə			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		F F G nmittee L	vent Expense ees ood/Beverage Expen ift/Awards/Memorials egal Services The Instruction G i	Expense	Office Over Polling Exp Printing Ex Salaries/W	rhead pense pens ages	e /Contract Labor		Travel in Distric Travel Out of Di	Equipmer t istrict	Expense nt & Related Expense y not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethi	cs Commission Filers)
1	Sch: 10/46 Rpt: 30/66	2		Claudia (The	Honorable))				00084239	(Euni	
4	Date	5	Payee name									
	11/18/2024		Delta Airlines									
6	Amount (\$)	7	Payee address	s; City;	State;	; Zip Coo	de					
	\$35.00		1030 Delta B	oulevard								
			Atlanta, GA 3	80354								
8	PURPOSE	(a)	Category (Soo	Categories listed at t	ho top of this sch	odulo)	(b)	Description				
	OF			ead/Rental Ex		ieduic)	. ,	<u> </u>	outsi	de of Texas. Con	nplete Sc	hedule T.
	EXPENDITURE							Check if Austin	ı, ТХ,	officeholder livin	g expens	se
								Bag fees				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	eholder name	С	Office sou	ght			Office h	eld	
	Date		Payee name									
	10/30/2024		Delta Airlines	;								
	Amount (\$)		Payee address	; City;	State:	; Zip Co	de					
	\$114.99		1030 Delta B		State,	, zip coi	ue					
	Φ114.99		1030 Della B	oulevalu								
			Atlanta, GA 3	80354								
	PURPOSE	(a)	Category (See	Categories listed at t	he top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Office Overh	ead/Rental Ex	pense					de of Texas. Con		
										officeholder livin	g expens	Se
								Flight change	e fe	е		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	eholder name	C	Office sou	ght			Office h	eld	
	Date		Payee name									
	10/16/2024		Discount Tire	!								
					Ctoto	; Zip Co	do					
	Amount (\$)		Payee address	-	State,	, zip coo	ue					
	\$1,201.36		1411 W Ben	white Biva								
			Austin, TX 78	3704								
	PURPOSE	(a)	Category (See	Categories listed at t	he top of this sch	nedule)	(b)	Description				
	OF			n Equipment /		,			outsi	de of Texas. Con	nplete Sc	hedule T.
	EXPENDITURE		Expense	• •						officeholder livin		
								Installation of	f tire	es and allig	nment	i
	Complete ONLY if direct		Candidate/Office	eholder name	C	Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Η										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	rhead/Re pense pense ages/Co	eimbursement ental Expense ntract Labor this form.		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	2	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission File	ers)	
	Sch: 11/46 Rpt: 31/66		Ordaz Perez, Claudia (The Honorable)					00084239	-	
4	Date	5	Payee name							
	11/14/2024		Doubletree Suites Austin							
6	Amount (\$)	7	Payee address; City; State;	; Zip Co	de					
	\$402.41		303 W 15th St							
			Austin, TX 78701							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) De	escription				
	OF EXPENDITURE		Travel Out of District	ouulo)			outsio	de of Texas. Complete Schedule T.		
	EXPENDITORE					-		officeholder living expense		
					Lo	odging in Au	Istir	n		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght			Office held		
_	Data	_								
	Date		Payee name							
	07/11/2024		EP Easy Storage							
	Amount (\$)			; Zip Co	de					
	\$68.00		344 North Zaragoza Road							
			El Paso, TX 79907							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	edule)	(b) De	escription				
	OF EXPENDITURE		Office Overhead/Rental Expense			Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
						orage unit	TX,	onicenoider living expense		
					50	orage and				
	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	nht			Office held		
	expenditure to benefit C/Oł				Jin					
_	Date		Payee name							
	10/21/2024		EP Easy Storage							
				- Zin Co	do					
	Amount (\$) \$68.00		Payee address; City; State; 344 North Zaragoza Road	; Zip Co	ue					
	φ00.00		344 North Zarayoza Roau							
			El Paso, TX 79907							
	PURPOSE OF		Category (See Categories listed at the top of this sch	edule)	(b) De	escription	utoi	da of Tayaa, Complete Cabadula T		
	EXPENDITURE		Office Overhead/Rental Expense		⊨	4		de of Texas. Complete Schedule T. officeholder living expense		
					st	orage unit	,			
					-	C I				
-	Complete ONLY if direct		Candidate/Officeholder name C	Office sou	ght			Office held		
	expenditure to benefit C/OI				-					
-										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Office Overhe Food/Beverage Expense Polling Expen Gift/Awards/Memorials Expense Printing Exper	nse es/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: 12/46 Rpt: 32/66		Ordaz Perez, Claudia (The Honorable)			00084239				
4	Date 09/23/2024	5	Payee name EP Easy Storage							
6	Amount (\$) \$68.00	7	Payee address; City; State; Zip Code 344 North Zaragoza Road El Paso, TX 79907							
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) (b) Office Overhead/Rental Expense			de of Texas. Complete Schedule T. officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sough	t		Office held				
	Date		Payee name							
	12/11/2024		EP Easy Storage							
	Amount (\$) \$98.00		Payee address; City; State; Zip Code 344 North Zaragoza Road							
			El Paso, TX 79907	-						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) (b Office Overhead/Rental Expense			de of Texas. Complete Schedule T. officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought	t		Office held				
	Date		Payee name							
	07/08/2024		El Paso Democratic Party							
	Amount (\$) \$500.00		Payee address; City; State; Zip Code 1401 Montana Ave suite e							
			El Paso, TX 79902							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) (b Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense Paso Democratic Party Golf				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name Office sought	t		Office held				

	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 mittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	oense 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			•	3	Filer ID (Ethics Commission Filers)			
-	Sch: 13/46 Rpt: 33/66		Ordaz Perez, Claudia (The Honorable)				00084239			
4	Date 09/09/2024		Payee name El Paso International Airport							
6	Amount (\$) \$55.46		Payee address; City; State; 6701 Convair Rd El Paso, TX 79925	Zip Co	le					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held			
	Date		Payee name							
	10/29/2024		Fig+Brie							
	Amount (\$) \$467.94		Payee address; City; State; 3800 N Mesa St Suite C12	Zip Co	le					
			El Paso, TX 79902							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)	Check if Austir	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense or fundraiser gathering			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held			
	Date		Payee name							
	07/24/2024		Flying J Fort Stockton							
	Amount (\$) \$55.56		Payee address; City; State; 2571 N Front St	Zip Co	le					
			Fort Stockton, TX 79735							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)			ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held			

	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 Exp Printing Ex Salaries/W	rhead pense pens (ages	se s/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: 14/46 Rpt: 34/66		Ordaz Perez, Claudia (The Honorable))				00084239		
4	Date 08/31/2024		Payee name Ghoul Coffee							
6	Amount (\$) \$17.84		Payee address; City; State; 2324 E Cesar Chavez St Austin, TX 78702	; Zip Co	de					
8	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)	(b)			de of Texas. Complete Schedule T. officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght			Office held		
	Date		Payee name							
	10/13/2024		HEB							
	Amount (\$) \$17.44		Payee address; City; State; 1000 E 41st St Austin, TX 78751	; Zip Co	de					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense Istin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght			Office held		
	Date		Payee name							
	07/02/2024		Hill Country Springs, Inc							
	Amount (\$) \$10.83		Payee address; City; State; 10019 S IH 35 Frontage Rd	; Zip Co	de					
			Austin, TX 78747							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Office Overhead/Rental Expense	edule)	(b)		, TX,	de of Texas. Complete Schedule T. officeholder living expense plier		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name C	Office sou	ght			Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reinbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Office States Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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 3	Filer ID (Ethics Commission Filers)							
	Sch: 15/46 Rpt: 35/66	Ordaz Perez, Claudia (The Honorable)	00084239							
4	Date 08/02/2024	Payee name Hill Country Springs, Inc								
6	Amount (\$) \$10.83	Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd Austin, TX 78747 Austin, TX 78747								
8	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense Ipplier							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	09/04/2024	Hill Country Springs, Inc								
	Amount (\$) \$10.83	Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense I pplier							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/02/2024	Hill Country Springs, Inc								
	Amount (\$) \$9.82	Payee address; City; State; Zip Code 10019 S IH 35 Frontage Rd								
		Austin, TX 78747								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense I pplier							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	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 Expens Imittee Legal Services The Instruction Guide ex		Office Over Polling Expe Printing Exp Salaries/Wa	ense ges/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: 16/46 Rpt: 36/66		Ordaz Perez, Claudia (The Hono	rable)				00084239		
4	Date 11/02/2024	5	Payee name Hill Country Springs, Inc							
6		-		Ctoto	Zip Cod					
0	Amount (\$) \$10.83	ľ	Payee address; City; 10019 S IH 35 Frontage Rd	State,	Zip Cou	e				
	\$10.03		10019 S IN 35 FIOIllage Ru							
			Austin, TX 78747							
8	PURPOSE	(a)	Category (See Categories listed at the top o	f this sche	edule) (b) Description				
	OF EXPENDITURE		Office Overhead/Rental Expense		,		outsi	de of Texas. Complete Schedule T.		
	EXFENDITORE							officeholder living expense		
						Office water	sup	plier		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office soug	nt		Office held		
	Date		Payee name							
	12/03/2024		Hill Country Springs, Inc							
	Amount (\$)		Payee address; City;	State:	Zip Cod	9				
	\$24.57		10019 S IH 35 Frontage Rd	,						
			Austin, TX 78747							
	PURPOSE OF	(a)	Category (See Categories listed at the top o		edule) (b) Description				
	EXPENDITURE		Office Overhead/Rental Expense)				de of Texas. Complete Schedule T. officeholder living expense		
						Office water				
						Onice water	sup	pilei		
_	Complete <u>ONLY</u> if direct		andidate/Officeholder name		Office soug	at		Office held		
	expenditure to benefit C/OF		anduale/Onicenolder name	0	South South	n		Once new		
	Date		Payee name							
	10/01/2024		Hyatt Regency Mexico City							
	Amount (\$)		Payee address; City;	State;	Zip Cod	e				
	\$48.94		Av. Insurgentes Sur 724							
			-							
			Mexico City 03100 Mexico							
	PURPOSE	(a)	Category (See Categories listed at the top o	f this sche	edule) (b) Description				
	OF EXPENDITURE		Food/Beverage Expense					de of Texas. Complete Schedule T.		
	-							officeholder living expense during legislative trip		
								ບບາກາງ ເຮັງເອເລແນະ ແມ່ນ		
		Ĺ	andidate (Office held)			- 4				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	0	Office soug	ii.		Office held		

			EXPEN	DITURE CATEGOR	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Service	e Expense emorials Expense	Office Over Polling Exp Printing Exp Salaries/Wa	ense ges/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			-	Filer ID (Ethics Commission Filers)	
_	Sch: 17/46 Rpt: 37/66		Ordaz Perez, Claudia	(The Honorable)				00084239
4	Date	5	Payee name					
	10/07/2024		Hyatt Regency Mexic	o City				
6	Amount (\$)	7	Payee address; City	r; State;	Zip Cod	e		
	\$28.77		Av. Insurgentes Sur 7	24				
			Mexico City 03100 M	exico				
8	PURPOSE					b) Description		
ľ	OF		Category (See Categories) Food/Beverage Expe		edule)		outsi	side of Texas. Complete Schedule T.
	EXPENDITURE		l oou/Develage Expe			Check if Austir	, TX	K, officeholder living expense
						Meal in Mexi	CO (during legislative trip
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Officeholder na	ame C	Office soug	ht		Office held
╞	Data							
	Date		Payee name					
	10/07/2024		Hyatt Regency Mexic	o City				
	Amount (\$)		Payee address; City	; State;	Zip Cod	e		
	\$45.26		Av. Insurgentes Sur 7	24				
			Mexico City 03100 M	EXICO				
	PURPOSE OF		Category (See Categories		edule)	b) Description		
	EXPENDITURE		Food/Beverage Expe	nse				side of Texas. Complete Schedule T. K, officeholder living expense
								during legislative trip
						wear in wear		
	Complete ONLY if direct		andidate/Officeholder na	ame C	Office soug	ht		Office held
	expenditure to benefit C/OI				inte eeug			
	Date		Payee name					
	10/01/2024		Hyatt Regency Mexic	o City				
	Amount (\$)		Payee address; City	: State:	Zip Cod	e		
	\$121.50		Av. Insurgentes Sur 7					
	+							
			Mexico City 03100 M	exico				
	PURPOSE	(a)	Category (See Categories	isted at the top of this sch	edule)	b) Description		
	OF EXPENDITURE		Food/Beverage Expe		,			side of Texas. Complete Schedule T.
	EXPENDITORE							K, officeholder living expense
						Meal in Mexi	CO (during legislative trip
	0 1.1 0.111	Ŀ						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	ame C	Office soug	nt		Office held
	F							

			EXPENDITURE	CATEGOR	RIES 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 Ex Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense
1	Total pages Schedule F1:	2 FILF				-	3	Filer ID	(Ethics Commission Filers)
_	Sch: 18/46 Rpt: 38/66		z Perez, Claudia (The H	onorable))			00084239	(
4	Date	5 Paye	e name						
	10/01/2024	Hyat	t Regency Mexico City						
6	Amount (\$)	7 Paye	e address; City;	State;	; Zip Coc	е			
	\$47.11	Av. I	nsurgentes Sur 724						
		Mexi	co City 03100 Mexico						
8	PURPOSE					b) Description			
ľ	OF		GORY (See Categories listed at the l/Beverage Expense	top of this sch	iedule)		outsi	ide of Texas. Comp	lete Schedule T.
	EXPENDITURE	1000						, officeholder living	
						Meal in Mexi	со	during legisla	ative trip
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candic	late/Officeholder name	C	Office soug	ht		Office he	ld
	Date	Paye	e name						
	10/07/2024	Isola	Polanco						
-	Amount (\$)	Pave	e address; City;	State:	; Zip Coc	e			
	\$271.89		Emilio Castelar 149	otato,	,p 000				
	\$211.00	, (v. L							
		Mexi	co City 11550 Mexico						
	PURPOSE OF		OORY (See Categories listed at the	top of this sch	iedule)	b) Description			
	EXPENDITURE	Food	/Beverage Expense					ide of Texas. Comp , officeholder living	
						Meeting in M			
						mooting in m	0,11	oo dannig log	
	Complete ONLY if direct	Candic	ate/Officeholder name		 Office soug	ht		Office he	Id
	expenditure to benefit C/OI	Ganale			Shiee Soug			onice ne	
⊨	Date	Pave	e name						
	10/01/2024		na Cocina de Casa						
	Amount (\$)	Pave	e address; City;	State:	; Zip Coc	e			
	\$181.04		Lago Zurich 245 Amp G		,				
		Mexi	co City 11529 Mexico						
	PURPOSE	(a) Cate	OORY (See Categories listed at the	top of this sch	iedule)	b) Description			
	OF EXPENDITURE	Food	/Beverage Expense					ide of Texas. Comp	
								, officeholder living	
						Meeting in M	exi	co duning leg	isialive liip
	0 1 1 0 11 1 1	<u> </u>							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candic	late/Officeholder name	C	Office soug	ht		Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica 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 Expense Travel in District Travel Out of District OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 19/46 Rpt: 39/66	Ordaz Perez, Claudia (The Honorable)	00084239							
4	Date 07/16/2024	Payee name Kona Grill								
6	Amount (\$) \$58.45	Payee address; City; State; Zip Code 8889 Gateway Blvd W Ste 1740 El Paso, TX 79925								
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	12/18/2024	Masters, Cristina								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,500.00	7207 Winecup Holw Austin, TX 78750								
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. , TX, officeholder living expense as bonus							
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	08/19/2024	Maxwell Ford								
	Amount (\$) \$83.49	Payee address;City;State;Zip Code5000 S I-35 Frontage Rd								
		Austin, TX 78745								
	PURPOSE OF EXPENDITURE		outside 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							

			EXPENDITURE CATEGOR	RIES 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 Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	oense 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				2	Filer ID (Ethics Commission Filers)
1	Sch: 20/46 Rpt: 40/66	2	Ordaz Perez, Claudia (The Honorable)			00084239	
4	Date 09/06/2024	5	Payee name Mustang Parking				
6	Amount (\$) \$8.00	7	Payee address; City; State; 201 E. Main St El Paso, TX 79901	Zip Co	le		
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)			ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office sou	ht		Office held
	Date		Payee name				
	09/09/2024		Mustang Parking				
	Amount (\$) \$5.00		Payee address; City; State; 201 E. Main St	Zip Co	le		
			El Paso, TX 79901				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name O)ffice sou	ht		Office held
	Date		Payee name				
	09/09/2024		Mustang Parking				
	Amount (\$) \$4.00		Payee address; City; State; 201 E. Main St	Zip Co	le		
			El Paso, TX 79901				
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Fees	edule)			ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Exp Printing Ex Salaries/W	kpense /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	IAME			Filer ID (Ethics Commission Filers)			
	Sch: 21/46 Rpt: 41/66		Ordaz Perez, Claudia (The Honorable) 00084239							
4	Date 10/11/2024	5	Payee name Nori							
6	Amount (\$) \$98.50		Payee address; City; State; 3208 Guadalupe St B Austin, TX 78705	Zip Co	de					
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			
	Date		Payee name							
	07/22/2024		Paso Del Norte Autograph							
	Amount (\$) \$66.29		Payee address; City; State; 10 Henry Trost Ct	Zip Co	de					
			El Paso, TX 79901							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sch Food/Beverage Expense	edule)			ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ght		Office held			
	Date		Payee name							
	09/11/2024		Pink Granite Foundation							
	Amount (\$) \$150.00		Payee address; City; State; 1100 West Avenue Suite B	Zip Co	de					
			Austin, TX 78701							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sch Contributions/Donations Made By Candidate/Officeholder/Political Comm	,	Check if Austir	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense • for legislative staffer			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	ght		Office held			

		EX	PENDITURE CATEGO	RIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Food/B Gift/Aw nittee Legal S	ixpense everage Expense ards/Memorials Expense ervices istruction Guide explains	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/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:	ILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 22/46 Rpt: 42/66		udia (The Honorable))			00084239
4	Date 07/29/2024	Payee name Pool Burger					
6	Amount (\$) \$23.09	Payee address; 2315 Lake Austir	•	; Zip Cod	9		
		Austin, TX 78703					
8	PURPOSE OF EXPENDITURE	Category _{(See Categ} Food/Beverage E	ories listed at the top of this sch Expense	nedule) (ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officehold	ler name C	Office soug	nt		Office held
	Date	Payee name					
	11/15/2024	Qi Austin					
	Amount (\$) \$253.83	Payee address; 335 W 6th St Uni		; Zip Cod	9		
		Austin, TX 78701					
	PURPOSE OF EXPENDITURE	Category _{(See Categ} Food/Beverage E	pories listed at the top of this sch Expense	nedule) (ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officehold	ler name C	Office soug	nt		Office held
	Date	Payee name					
	12/18/2024	Runnels, Emily					
	Amount (\$) \$1,000.00	Payee address; 7600 Wood Hollc		; Zip Cod	ē		
		Austin, TX 78731					
	PURPOSE OF EXPENDITURE	Category _{(See Categ} Salaries/Wages/(ories listed at the top of this sch Contract Labor	nedule) (ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense bonus
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	andidate/Officehold	ler name C	Office soug	nt		Office held

			EXPENDITURE CATEG		OR B	OX 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 hmittee Legal Services The Instruction Guide explain	Office (Polling Printing Salarie	Overhea Expens J Expen s/Wage	se s/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	· · ·				3	Filer ID (Ethics Commission Filers)
1	Sch: 23/46 Rpt: 43/66	2	Ordaz Perez, Claudia (The Honorabl	e)				00084239
4	Date	5	Payee name					
	12/18/2024		Saenz, Denise					
6	Amount (\$)	7	Payee address; City; Sta	te; Zip (Code			
	\$1,000.00		14633 Escalera Dr					
			El Paso, TX 79928					
8	PURPOSE	(0)			(h)	Description		
ð	OF	(a)	Category (See Categories listed at the top of this s	chedule)	(0)	Description	outsi	ide of Texas. Complete Schedule T.
	EXPENDITURE		Salaries/Wages/Contract Labor					, officeholder living expense
						Staff Christm		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office s	ought			Office held
	Date		Payee name					
	07/15/2024		Southwest Inflight Wifi					
	Amount (\$)		ç	te; Zip (ode.			
	\$5.60		PO Box 36611	ιε, Ζιρ (Jue			
	φ0.00		FO B0X 30011					
			Dallas, TX 75235					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.
								, officeholder living expense
						wi-fi on board	b	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office s	ought			Office held
	Date		Payee name					
	09/09/2024		Southwest Inflight Wifi					
-	Amount (\$)		Payee address; City; Sta	te; Zip (Code			
	\$8.00		PO Box 36611	ю, ב ір (0000			
	40.00							
			Dallas, TX 75235					
	PURPOSE	(a)	Category (See Categories listed at the top of this s	chedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.
	EXPENDITORE							, officeholder living expense
						On board wi-	fi	
	Complete ONLY if direct		Candidate/Officeholder name	Office s	ought			Office held
	expenditure to benefit C/OI	4						

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Rein Fees Office Overhead/Rent Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contr The Instruction Guide explains how to complete thi	al Expense Transportation Equipment & Related Expense Travel in District Travel Out of District act Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 24/46 Rpt: 44/66	Ordaz Perez, Claudia (The Honorable)	00084239						
4	Date 07/23/2024	Payee name Starbucks							
6	Amount (\$) \$100.00	Payee address; City; State; Zip Code 3120 Palm Way Austin, TX 78758							
8	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense o card reload for meetings and events						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/10/2024	Starbucks							
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 3120 Palm Way Austin, TX 78758							
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Des Food/Beverage Expense	cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense o card reload for meetings and events						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	08/29/2024	Starbucks							
	Amount (\$) \$100.00	Payee address; City; State; Zip Code 3120 Palm Way							
		Austin, TX 78758							
	PURPOSE OF EXPENDITURE		cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense o card reload for meetings and events						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food Gift// nmittee Lega	t Expense /Beverage Expense wards/Memorials Ex I Services Instruction Guic		Office Ove Polling Exp Printing Ex Salaries/W	rheac pense pens ages	e /Contract Labor		Solicitation/Fund Transportation E Travel in District Travel Out of Di OTHER (enter a	Equipment of strict	& Related Expense
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics	Commission Filers)
1	Sch: 25/46 Rpt: 45/66		Ordaz Perez, C	laudia (The H	onorable)					00084239		
4	Date 09/12/2024		Payee name Starbucks									
6	Amount (\$)		Payee address;	City;	Stata	Zip Co	do					
0	\$100.00		3120 Palm Way Austin, TX 787	1	State,	, Ζιρ Ου	ue					
_	BUBBAAE	<u> </u>					<u> </u>					
8	PURPOSE OF EXPENDITURE		Category _{(See Ca} Food/Beverage		top of this sch	edule)			, TX,	de of Texas. Com officeholder living for meeting	g expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	older name	C	Office sou	ght			Office h	eld	
	Date		Payee name									
	10/03/2024		Starbucks									
	Amount (\$)		Payee address;	City;	State;	; Zip Co	de					
	\$100.00		3120 Palm Way Austin, TX 787									
	PURPOSE OF EXPENDITURE		Category _{(See Ca} Food/Beverage		top of this sch	edule)			, TX,	de of Texas. Com officeholder living for meeting	g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	older name	C	Office sou	ght			Office h	eld	
	Date		Payee name									
	11/01/2024		Starbucks									
	Amount (\$) \$100.00		Payee address; 3120 Palm Way	City; /	State;	; Zip Co	de					
			Austin, TX 787	58								
	PURPOSE OF EXPENDITURE		Category _{(See Ca} Food/Beverage		top of this sch	edule)			, TX,	de of Texas. Com officeholder living for meeting	g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeho	older name	C	Office sou	ght			Office h	eld	

				EXPENDI	FURE CATEGO	RIES FOR	BOX 8(a)	.)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Event Expense Fees Food/Beverage E Gift/Awards/Mem Legal Services The Instructio		Office Over Polling Exp Printing Ex Salaries/W	ense ages/Contrac	Expense ct Labor		Travel in District Travel Out of Dis	quipment & Related	
1	Total pages Schedule F1:	2	FII FR NAME				-		3	Filer ID	(Ethics Commis	sion Filers)
-	Sch: 26/46 Rpt: 46/66			az Perez, Claudia (The Honorable)								
4	Date 12/20/2024		Payee name Starbucks									
6	Amount (\$)		Payee addre	ss; City;	Stato	; Zip Co						
0	\$100.00		3120 Palm Austin, TX 7	Way	Slate	, Σι ρ Ο						
8	PURPOSE	(a)	Category (s)	a Catagorias lista	d at the top of this sch	adula)	b) Descr	rintion				
-	OF EXPENDITURE			age Expens		ieuuie)	Ch Ch	ieck if travel c ieck if Austin,	, TX,	le of Texas. Compofficeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	ceholder nam	e C	Office sou	ht			Office he	eld	
	Date		Payee name									
	10/15/2024		Sweetgreer	ı								
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	le					
	\$51.83		1007 S Cor Austin, TX 7	igress Ave		, F						
	DUDDOCE						(h) p					
	PURPOSE OF EXPENDITURE	(a)		ee Categories liste age Expens	d at the top of this sch C	nedule)	Ch	eck if travel c	, TX,	le of Texas. Com officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offi	ceholder nam	e (Office sou	ht			Office he	eld	
	Date		Payee name									
	07/23/2024		Taft Diaz									
	Amount (\$) \$33.06		Payee addre 209 N Stant		State	; Zip Coo	le					
			El Paso, TX	79901								
	PURPOSE OF EXPENDITURE			ee Categories liste age Expens	d at the top of this sch C	nedule)		ieck if travel c ieck if Austin,		le of Texas. Com officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offi	ceholder nam	e (Office sou	ht			Office he	eld	

		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:	· · · · · · · · · · · · · · · · · · ·	3 Filer ID (Ethics Commission Filers)
_	Sch: 27/46 Rpt: 47/66	Ordaz Perez, Claudia (The Honorable)	00084239
4	Date	5 Payee name	
	12/05/2024	Texas House Democratic Caucus	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,500.00	1100 Congress Ave	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	outside of Texas. Complete Schedule T.
			TX, officeholder living expense cratic Caucus dues
			cialic Caucus dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OF		
	Date	Payee name	
	07/29/2024	The Loren Hotel	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$198.68	1211 W Riverside Dr,	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
			rx, oncenoider iving expense
		meeting	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	12/18/2024	The UPS Store	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$159.64	6060 Cornerstone Ct West	
		Headquarters	
		San Diego, CA 92121	
-	PURPOSE	- -	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin,	TX, officeholder living expense
		Package over	night shipping costs to district director
<u> </u>	Complete ONIL V if direct	Candidato/Officebolder.name	Office hold
	expenditure to benefit C/OF		
L			
	OF EXPENDITURE	Candidate/Officeholder name Office sought	-

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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	Filer ID (Ethics Commission Filers)
1	Sch: 28/46 Rpt: 48/66	Ordaz Perez, Claudia (The Honorable)	00084239
4	Date 12/19/2024	Payee name The Whitely	
6	Amount (\$)	Payee address; City; State; Zip Code	
-	\$2,659.00	301 Brazos St. Austin, TX 78701	
8	PURPOSE		
0	OF		tside of Texas. Complete Schedule T. 'X, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/03/2024	Tiff's Treats Austin	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.00	1806 Nueces St Austin, TX 78701	
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense :ket
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/12/2024	UBER	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$6.35	1455 Market St 400, Headquaters	
		San Francisco, CA 94103	
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. X, officeholder living expense in Austin
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

	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 Expens ttee Legal Services The Instruction Guide exp	nt/Reimbursement d/Rental Expense e se s/Contract Labor ete this form.	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:	LER NAME			3 Filer ID (Ethics Commission Filers)					
	Sch: 29/46 Rpt: 49/66	rdaz Perez, Claudia (The Hono	orable)		00084239					
4	Date 07/29/2024	Payee name UBER								
6	Amount (\$) \$11.62	 7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103 								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Transportation in Austin										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name	Office sought		Office held					
	Date	ayee name								
	07/29/2024	BER								
	Amount (\$) \$12.09	ayee address; City; 155 Market St 400, Headquater an Francisco, CA 94103	State; Zip Code 'S							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top o avel Out of District	f this schedule) (b)		outside of Texas. Complete Schedule T. , TX, officeholder living expense n in Austin					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought		Office held					
	Date 07/30/2024	ayee name BER								
	Amount (\$) \$18.11	ayee address; City; 155 Market St 400, Headquater	State; Zip Code rs							
		an Francisco, CA 94103								
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top o avel Out of District	f this schedule) (b)		outside of Texas. Complete Schedule T. , TX, officeholder living expense in in Austin					
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name	Office sought		Office held					

		EXPENDITURE CATEGORIES FOR B	OX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhe Food/Beverage Expense Polling Expens Gift/Awards/Memorials Expense Printing Exper	nse Travel Out of District ss/Contract Labor OTHER (enter a category not listed above)							
1	Total pages Schedule F1:	ILER NAME	3 Filer ID (Ethics Commission Filers)							
	Sch: 30/46 Rpt: 50/66	Ordaz Perez, Claudia (The Honorable)	00084239							
4	Date 07/30/2024	Payee name UBER								
6	Amount (\$) \$12.94	 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103 								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Transportation in Austin										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name Office sought	: Office held							
	Date	ayee name								
	07/31/2024	IBER								
	Amount (\$) \$15.99	ayee address; City; State; Zip Code 455 Market St 400, Headquaters an Francisco, CA 94103								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Dffice held							
	Date 07/31/2024	ayee name IBER								
	Amount (\$) \$17.04	ayee address; City; State; Zip Code 455 Market St 400, Headquaters								
		an Francisco, CA 94103								
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin							
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	ndidate/Officeholder name Office sought	C Office held							

			EXPENDITURE CATEGOR	IES 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 FI	LER NAME			3	Filer ID (Ethics Commission Filers)			
	Sch: 31/46 Rpt: 51/66		rdaz Perez, Claudia (The Honorable)				00084239			
4	Date 08/01/2024		ayee name BER							
6	Amount (\$) \$12.65	 7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103 								
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin							officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name O	ffice soug	ht		Office held			
	Date	Pa	ayee name							
	08/02/2024	U	BER							
	Amount (\$) \$34.58	14	ayee address; City; State; 155 Market St 400, Headquaters an Francisco, CA 94103	Zip Coo	e					
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top of this sche ravel Out of District	dule)		ı, ТХ,	de of Texas. Complete Schedule T. , officeholder living expense n Austin			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								
	Date 09/08/2024		ayee name BER							
	Amount (\$) \$13.77	14	155 Market St 400, Headquaters	Zip Coo	e					
		Sa	an Francisco, CA 94103							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the top of this sche ravel In District	dule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense n the district			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name O	ffice soug	ht		Office held			

			EXPENDITURE CATEGOR	RIES 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 ID (Ethics Commission Filers)							
-	Sch: 32/46 Rpt: 52/66		Ordaz Perez, Claudia (The Honorable)				00084239				
4	Date 09/08/2024		Payee name UBER								
6	Amount (\$) \$29.28	 7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103 									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in the district							officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name O	office sou	ht		Office held				
	Date		Payee name								
	09/09/2024		UBER								
	Amount (\$) \$12.87		Payee address; City; State; 1455 Market St 400, Headquaters San Francisco, CA 94103	Zip Co	le						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense n Austin				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held				
	Date 09/09/2024		Payee name UBER								
	Amount (\$) \$8.26		1455 Market St 400, Headquaters	Zip Co	le						
			San Francisco, CA 94103								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)		, TX	de of Texas. Complete Schedule T. . officeholder living expense n Austin				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	office sou	ht		Office held				
		_		_		_					

	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 Git/Awards/Memorials Expense mittee Legal Services The Instruction Guide explains h	Office Over Polling Exp Printing Ex Salaries/W	oense 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: 33/46 Rpt: 53/66		Ordaz Perez, Claudia (The Honorable)				00084239		
4	Date 09/09/2024		Payee name UBER						
6	Amount (\$) \$15.88	7 Payee address; City; State; Zip Code 3 1455 Market St 400, Headquaters San Francisco, CA 94103							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Transportation in Austin							officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office souç	ht		Office held		
	Date		Payee name						
	09/10/2024		UBER						
	Amount (\$) \$7.03	:	Payee address; City; State; 1455 Market St 400, Headquaters San Francisco, CA 94103	Zip Coo	le				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense n Austin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office souç	ht		Office held		
	Date 09/10/2024		Payee name UBER						
	Amount (\$) \$14.71		1455 Market St 400, Headquaters	Zip Coo	le				
			San Francisco, CA 94103	i					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)		n, TX,	de of Texas. Complete Schedule T. , officeholder living expense n Austin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	office soug	ht		Office held		
		_		_		_			

	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 nmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp 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	· · · · ·		·	3	Filer ID (Ethics Commission Filers)			
	Sch: 34/46 Rpt: 54/66		Ordaz Perez, Claudia (The Honorable)				00084239			
4	Date	5	Payee name							
	09/10/2024		UBER							
6	Amount (\$) \$7.67	7 Payee address; City; State; Zip Code \$7.67 1455 Market St 400, Headquaters San Francisco, CA 94103								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	(aluba	(b) Description					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin							officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ıht		Office held			
	Date		Payee name							
	09/10/2024		UBER							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$12.59		1455 Market St 400, Headquaters San Francisco, CA 94103							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense n Austin			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	jht		Office held			
	Date		Payee name							
	09/10/2024		UBER							
	Amount (\$)		Payee address; City; State;	Zip Co	le					
	\$7.24		1455 Market St 400, Headquaters							
			San Francisco, CA 94103							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)		, тх,	de of Texas. Complete Schedule T. officeholder living expense n Austin			
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	Jht		Office held			

	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		-	3	Filer ID (Ethics Commission Filers)		
	Sch: 35/46 Rpt: 55/66		Ordaz Perez, Claudia (The Honorable)				00084239		
4	Date 09/11/2024		Payee name UBER						
6	Amount (\$) \$24.63	7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Transportation in Austin							officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name O	office sou	ht		Office held		
	Date		Payee name						
	09/27/2024		UBER						
	Amount (\$) \$35.92		Payee address; City; State; 1455 Market St 400, Headquaters San Francisco, CA 94103	Zip Co	le				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel In District	edule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense n the district		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H					Office held		
	Date 09/27/2024		Payee name UBER						
	Amount (\$) \$9.99		1455 Market St 400, Headquaters	Zip Co	le				
			San Francisco, CA 94103	r					
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel In District	edule)		, TX	de of Texas. Complete Schedule T. officeholder living expense n the district		
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name O	office sou	ht		Office held		
						_			

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		- Gift/Awards/Memorials Expense Polling Expense - Gift/Awards/Memorials Expense Printing Expense				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	Filer ID (Ethics Commission Filers)							
	Sch: 36/46 Rpt: 56/66		Ordaz Perez, Claudia (The Honorable)				00084239				
4	Date	5	Payee name								
	09/27/2024		UBER								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$19.63		1455 Market St 400, Headquaters								
			San Francisco, CA 94103								
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description						
	OF EXPENDITURE		Travel In District				de of Texas. Complete Schedule T.				
					Transportatio		officeholder living expense				
					ranoportatio	,					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	Iffice sou	yht		Office held				
-	Date		Payee name								
	10/10/2024		UBER								
	Amount (\$)			Zip Co	10						
	\$12.59		1455 Market St 400, Headquaters	Zip Cu	Je						
	\$12.59 1455 Market St 400, Headquaters										
			San Francisco, CA 94103								
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)		, TX,	de of Texas. Complete Schedule T. officeholder living expense n Austin				
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	office sou	Jht		Office held				
-	Date	<u> </u>	Payee name								
	10/10/2024		UBER								
	Amount (\$)		Payee address; City; State;	Zip Co	le						
	\$5.25		1455 Market St 400, Headquaters								
			San Francisco, CA 94103								
	PURPOSE OF		Category (See Categories listed at the top of this sche	edule)	(b) Description						
	EXPENDITURE		Travel Out of District				de of Texas. Complete Schedule T. , officeholder living expense				
					Transportatio						
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	office sou	jht		Office held				
\vdash											

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	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	3 Filer ID (Ethics Commission Filers)							
	Sch: 37/46 Rpt: 57/66	Ordaz Perez, Claudia (The Honorable)	00084239							
4	Date 10/10/2024	Payee name UBER								
6	Amount (\$) \$13.60									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Image: Check if Austin, TX, officeholder living expense Transportation in Austin										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/10/2024	UBER								
	Amount (\$) Payee address; City; State; Zip Code \$28.81 1455 Market St 400, Headquaters									
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense n in Austin							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
	10/11/2024	UBER								
	Amount (\$) \$14.85	Payee address; City; State; Zip Code 1455 Market St 400, Headquaters								
		San Francisco, CA 94103								
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense n in Austin							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	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 h	Office Ove Polling Exp Printing Ex Salaries/W	oense 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: 38/46 Rpt: 58/66		Ordaz Perez, Claudia (The Honorable)				00084239		
4	Date 10/11/2024		Payee name UBER						
6	Amount (\$) \$15.28	7 Payee address; City; State; Zip Code 5.28 1455 Market St 400, Headquaters San Francisco, CA 94103							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description 						officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name O	office sou	ht		Office held		
	Date		Payee name						
	10/12/2024		UBER						
	Amount (\$) \$8.96		Payee address; City; State; 1455 Market St 400, Headquaters San Francisco, CA 94103	Zip Co	le				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)		, TX,	de of Texas. Complete Schedule T. , officeholder living expense n Austin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name O	ffice sou	ht		Office held		
	Date		Payee name						
	10/12/2024		UBER						
	Amount (\$) \$8.96		Payee address; City; State; 1455 Market St 400, Headquaters	Zip Co	le				
			San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel Out of District	edule)		, TX	de of Texas. Complete Schedule T. , officeholder living expense n Austin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder name O	office sou	ht		Office held		
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			EXPENDITURE	CATEGORIE	ES FOR B	OX 8(a)		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:	FILER I	NAME				3	Filer ID (Ethics Commission Filers)								
	Sch: 39/46 Rpt: 59/66		Perez, Claudia (The Ho	onorable)				00084239								
4	Date 10/13/2024	Payee r UBER	name													
6	Amount (\$) \$11.98	 7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103 														
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin							, officeholder living expense									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidat	e/Officeholder name	Offi	ce sough	:		Office held								
	Date	Payee r	name													
	10/14/2024	UBER														
	Amount (\$) \$13.74	1455 N	address; City; Iarket St 400, Headqua ancisco, CA 94103		Zip Code											
	PURPOSE OF EXPENDITURE		ソ (See Categories listed at the tr Out of District	op of this schedu	_{ile)} (b		ı, TX,	side of Texas. Complete Schedule T. K, officeholder living expense In Austin								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidat	e/Officeholder name	Offi	ce sough	:		Office held								
	Date 10/15/2024	Payee r UBER	name													
	Amount (\$) \$13.96		larket St 400, Headqua		Zip Code											
		San Fr	ancisco, CA 94103		i											
	PURPOSE OF EXPENDITURE		Y (See Categories listed at the tr Out of District	op of this schedu	_{ile)} (b		ı, ТХ,	side of Texas. Complete Schedule T. K, officeholder living expense In Austin								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidat	e/Officeholder name	Offi	ce sough			Office held								

	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 F			-	3	Filer ID (Ethics Commission Filers)				
	Sch: 40/46 Rpt: 60/66		Drdaz Perez, Claudia (The Honorable)				00084239				
4	Date 10/16/2024		Payee name UBER								
6	Amount (\$) \$26.33	 7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103 									
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin							officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name O	office souç	ht		Office held				
	Date	F	Payee name								
	10/16/2024	ι	JBER								
	Amount (\$) \$16.78	1	Payee address; City; State; 455 Market St 400, Headquaters Gan Francisco, CA 94103	Zip Coo	le						
	PURPOSE OF EXPENDITURE	(a) (Category (See Categories listed at the top of this sche Travel Out of District	edule)		ı, ТХ,	de of Texas. Complete Schedule T. , officeholder living expense n Austin				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name O	ffice sou	ht		Office held				
	Date	F	ayee name								
	10/30/2024		JBER								
	Amount (\$) \$29.98		Payee address; City; State; 455 Market St 400, Headquaters	Zip Coo	le						
		S	San Francisco, CA 94103	i							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this sche Travel In District	edule)		ı, ТХ,	de of Texas. Complete Schedule T. officeholder living expense n the district				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name O	office soug	ht		Office held				
						_					

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)	
	Sch: 41/46 Rpt: 61/66		Ordaz Perez, Claudia (The Honorable)	00084239				
4	Date 12/09/2024	5	Payee name UBER					
6	Amount (\$) \$9.99	7	Payee address; City; State; 1455 Market St 400, Headquaters San Francisco, CA 94103	Zip Co	le			
8	PURPOSE OF EXPENDITURE	Travel In District						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	Jht		Office held	
	Date		Payee name					
	11/30/2024		UBER					
	Amount (\$) \$36.97		Payee address; City; State; 1455 Market St 400, Headquaters San Francisco, CA 94103	Zip Co	le			
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)	Check if Austin	n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense n College Station	
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	ıht		Office held	
	Date		Payee name					
	11/18/2024		UBER					
	Amount (\$) \$33.41		Payee address; City; State; 1455 Market St 400, Headquaters	Zip Co	le			
			San Francisco, CA 94103					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this scho Travel Out of District	edule)	Check if Austin	n, TX	ide of Texas. Complete Schedule T. , officeholder living expense n Palm Beach for legislative work trip	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Dffice sou	Jht		Office held	

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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	3 Filer ID (Ethics Commission Filers)					
1	Sch: 42/46 Rpt: 62/66	Ordaz Perez, Claudia (The Honorable)	00084239					
4	Date 11/18/2024	Payee name UBER						
6	Amount (\$) \$48.80	Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103						
8	PURPOSE OF EXPENDITURE	a) Category (See Categories listed at the top of this schedule) (b) Description Travel Out of District Check if travel ou Check if Austin, T	utside of Texas. Complete Schedule T. TX, officeholder living expense n in Palm Beach for legislative work trip					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/15/2024	UBER						
	Amount (\$) \$18.90	Payee address; City; State; Zip Code 1455 Market St 400, Headquaters						
		San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense n in the district					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	11/15/2024	UBER						
	Amount (\$) \$41.75	Payee address; City; State; Zip Code 1455 Market St 400, Headquaters						
		San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense h in the district					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held					

	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 nmittee Legal Services The Instruction Guide explains h	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor how to complete this form.			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: 43/46 Rpt: 63/66		Ordaz Perez, Claudia (The Honorable) 00084239						
4	Date		5 Payee name						
	11/12/2024		UBER						
6	Amount (\$) \$7.65	 7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters San Francisco, CA 94103 							
8	PURPOSE	(a)	Catagony		(b) Description				
U	 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin 						officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name O	office sou	ht		Office held		
	Date		Payee name						
	11/12/2024		UBER						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$15.31 1455 Market St 400, Headquaters San Francisco, CA 94103								
PURPOSE OF EXPENDITURE			 (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin 						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office sou	ht		Office held		
	Date		Payee name						
	11/12/2024		UBER						
	Amount (\$)		Payee address; City; State;	Zip Co	le				
	\$14.03		1455 Market St 400, Headquaters						
			San Francisco, CA 94103						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Travel Out of District	edule)		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense n Austin		
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name O	office soug	ht		Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursen Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form	se Transportation Equipment & Related Expense Travel in District Travel Out of District r OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · ·	3 Filer ID (Ethics Commission Filers)						
	Sch: 44/46 Rpt: 64/66	Drdaz Perez, Claudia (The Honorable)	00084239						
4	Date 11/12/2024	5 Payee name UBER							
6	Amount (\$)								
U	\$46.50	 7 Payee address; City; State; Zip Code 1455 Market St 400, Headquaters 							
		San Francisco, CA 94103							
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Image: Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transportation in Austin									
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	10/30/2024								
	Amount (\$) \$29.98								
	DUDDOCE	San Francisco, CA 94103							
	PURPOSE OF EXPENDITURE		n ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense tation in El Paso						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	07/15/2024	JSPS							
	Amount (\$) \$195.00	Payee address; City; State; Zip Code 380 N Zaragoza							
		El Paso, TX 79907							
	PURPOSE OF EXPENDITURE		ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursem Office Overhead/Rental Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labo	se Transportation Equipment & Related Expense Travel in District Travel Out of District r OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)						
-	Sch: 45/46 Rpt: 65/66	Ordaz Perez, Claudia (The Honorable) 00084239							
4	Date 10/12/2024	Payee name Uber Eats							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$58.55								
8	DIRDOSE								
0	B PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF EXPENDITURE Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Meal while in Austin								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/16/2024	Uber Eats							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$102.88	1455 Market St. 4th Fl Trevose, PA 94103							
	PURPOSE OF EXPENDITURE		n ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense alm Beach for legislative work trip						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	11/14/2024	Valero							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$25.91	3001 Yarbrough							
		El Paso, TX 79915							
	PURPOSE OF EXPENDITURE		ר ravel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held						

EXPENDITURE CATEGORIES FOR BOX 8(a)												
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			nmittee	Event Expense Loa Fees Offi Food/Beverage Expense Polli Gift/Awards/Memorials Expense Prin			Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor			Transportation E Travel in District Travel Out of Di		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID (Ethics Commission Filers)		
	Sch: 46/46 Rpt: 66/66		Ordaz Perez, Claudia (The Honorable) 00084239									
4	Date	5	Payee name	9								
	09/11/2024		Walton's Bakery									
6	Amount (\$)	7	7 Payee address; City; State; Zip Code									
	\$57.88		609 W 6th									
			Austin, TX	78701								
8	PURPOSE	(a)	Category (See Categories li	sted at the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			rage Exper		,					nplete Schedule T.	
										officeholder living	g expense	
								Staff meeting)			
9	Complete ONLY if direct		Candidate/Of	ficebolder na	me C	office sou	aht			Office h	old	
9	expenditure to benefit C/OI		Januluale/OI		ine C		ynt			Onice In	eiu	
	Date		Payee name	,								
	11/11/2024		Wyndham									
	Amount (\$)	\vdash	Payee addre	ess; City	State;	Zip Co	de					
	\$432.83		516 W. 8th									
			Austin, TX	78701								
	PURPOSE	(a)	Category (See Categories li	sted at the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	Travel Out of District				,				ide of Texas. Complete Schedule T.		
									officeholder living	g expense		
								Lodging in Au	usti	n		
	Complete ONLY if direct		Candidate/Of	ficoboldor po	mo (office sou	abt			Office h	old	
	expenditure to benefit C/OI		Januluale/OI		ine C	mice sou	ynt			Onice In	eiu	