CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

	Guide explains how to compl	lete this form.	1 Filer ID (Ethics Commi 00066066		2 Total pages filed: 114
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Charles L.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	01/14/2025
	THOIR WILL	Perry		C	
4 CANDIDATE /	ADDRESS / PO BOX; APT		-17.	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER	P.O. Box 94806	/ 5011E #, Cit	Υ,	ZIP CODE	Date Hard-delivered of Date Feethands
MAILING ADDRESS					Receipt # Amount
Change of Address	Lubbock, TX 79493				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER NAME	Mr.	Gary			
	NICKNAME	LAST		SUFFIX	
		Swann			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO PC) BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZIP CODE
ADDRESS	PO Box 53730				
(Residence or Business)	Lubbock, TX 79453				
- 0111011	:55.4 605.5 BHO	·:- •:: • • • • • • • • • • • • • • • • •	TITELLON		
7 CAMPAIGN TREASURER		NE NUMBER E	EXTENSION		
PHONE	(806) 794-3344 x106				
8 REPORT	+				
TYPE	X January 15	30th day before	e election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before	election	Exceeded modified	Final Report (Attach C/OH-FR)
			ы.	reporting limit]
9 PERIOD	Month Day Year			Month Day	Year
COVERED	07/01/2024	Tŀ	HROUGH	12/31/202	.4
					
10 ELECTION	ELECTION DATE Month Day Year		Primary	ELECTION TYPE Runoff	Other
	William Day 164		-		Other
		L G	Seneral	Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT	(if known)
	State Senator District 28			State Senator Di	
-					
		GO 1	TO PAGE 2		

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 114

13 C / OH NAME	Ethics Commission Filers)								
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political ex These expenditures may have been made w officeholders are required to report this info	vithout the candidate's or office	holder's knowledge or					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME							
	GENERAL								
		COMMITTEE ADDRESS							
	SPECIFIC								
		COMMITTEE CAMPAIGN TREASURER N	AME						
		COMMITTEE CAMPAIGN TREASURER A	DDRESS						
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHE ES OF LOANS, OR CONTRIBUTIONS MAD		\$ 0.00					
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF	LOANS)	\$ 570,057.13					
EXPENDITURE TOTALS									
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 131,900.60					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 1,869,861.38					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOA TING PERIOD	NS AS OF THE LAST DAY	\$ 0.00					
17 AFFIDAVIT			penalty of perjury, that the acc udes all information required to Code.						
		The	e Honorable Charles L. Perr	у					
		Signa	ature of Candidate or Officehol	der					
AFFIX NO	TARY STAMP / SEAL ABO	DVE							
Sworn to and subs	cribed before me, by the s	aid	, this the	day					
of	, 20, to ce	rtify which, witness my hand and seal of offi	ce.						
Signature of office	Signature of officer administering Printed name of officer administering Title of officer administering oath								

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

18 FILER NAMI Perry, Cha	E rles L. (The Honorable)	19 Filer ID 00066066	(Ethics Commission Filers)						
20 SCHEDULE NAME OF S			SUBTOTAL AMOUNT						
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 570,057.1						
2.	\$								
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$						
4.	SCHEDULE E: LOANS		\$						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	6	\$ 102,536.8						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$						
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$						
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 29,363.7						
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$						
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$						
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$						
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$						

	MONET	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/49 Rpt: 4/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commissi 00066066	on Filers)	
4	Date 12/13/2024	 Full name of contributor out-of-state PAC (ID#:_A&M PAC Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$2,500.00	
_	Dringing Loon	Austin, TX 78768	O Employer (See Instructions	<u></u>			
ð	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ABC PAC Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78767		L			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ACT for TX Classroom Teachers Ass. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
		Austin, TX 78767					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_AT&T Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701		•	Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_Adamson, Geoffrey (Mr.) Contributor address; City; State; Zip Code New York, NY 10014			Amount of Contribution (\$)	\$10,000.00	
	Principal occu CFO	pation / Job title (See Instructions)	Employer (See Instructions Upwell Water	s)			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 2/49 Rpt: 5/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00
_		Irving, TX 75038	-				
8	CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Cottonwood Financial			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Deireciant	Houston, TX 77027	_	Faralana (Octobration)	$\overline{\Gamma}$		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor X out-of-state PAC (ID#: CALL) Altria Group Inc PAC Contributor address; City; State; Zip Code	C00	089136)		Amount of Contribution (\$)	\$1,000.00
	Dringing ago	Washington , DC 20001 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor	sib	le Government		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 11/23/2024	Full name of contributor X out-of-state PAC (ID#: CAMERICAN Express PAC Contributor address; City; State; Zip Code Washington, DC 20004	C00)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1			
	The Instru	ction Guide explains how to complete t	his form.	1	Total pages Schedule A1: Sch: 3/49 Rpt: 6/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/13/2024	 Full name of contributor	C (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
	Dringing Loggy	Corpus Christi, TX 78401	Employer (Coo Instruction			
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	15)		
	Date 12/10/2024	Full name of contributor x out-of-state PAC Amgen PAC Contributor address; City; State; Zip Code	C (ID#: C00251876)		Amount of Contribution (\$)	\$1,000.00
		Thousand Oaks, CA 91320				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 11/13/2024	Full name of contributor out-of-state PAC Ancira Strategic Partners LLP Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 12/13/2024	Full name of contributor out-of-state PAC Anderson, Carson (Mr.) Contributor address; City; State; Zip Code Florence, AL 79423	C (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions TNT Fireworks	ıs)		
	Date 12/13/2024	Full name of contributor out-of-state PAC Anderson, Terry Contributor address; City; State; Zip Code Florence, AL 35630	C (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions TNT Fireworks	ıs)		
			'			

	MONET	MONETARY POLITICAL CONTRIBUTIONS				E A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/49 Rpt: 7/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)	
4	Date 10/01/2024	 Full name of contributor	00279224)	7	Amount of Contribution (\$)	\$2,000.00	
8	Principal occu	Houston, TX 77042 pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 11/13/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Corpus Cristi, TX 78403-2767 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#:_ Associated General Contractors of TX PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00	
	Principal occu	Austin, TX 78768 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 09/03/2024	Full name of contributor	00235739		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
		,					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/49 Rpt: 8/114			
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	on Filers)		
4	Date 10/23/2024	5 Full name of contributorBank of America State an6 Contributor address; City; St			7	Amount of Contribution (\$)	\$2,000.00		
		Wilmington, DE 19808							
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)				
	Date 12/13/2024	Full name of contributor Baxter Healthcare PAC Contributor address; City; St	x out-of-state PAC (ID#: C)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu	Washington, DC 20005 pation / Job title (See Instructions)	Employer (See Instructions	 ;)				
	·	`	,	. , ,					
	Date 10/28/2024	Full name of contributor Baze, Daniel (Mr.) Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00		
	Deignainal annu	Lubbock, TX 79424	\	Franks voy (Cas Instructions	<u></u>				
	Pilicipai occu	pation / Job title (See Instructions)	Employer (See Instructions	·)				
	Date 09/05/2024	Full name of contributor Binkley, James (Mr.) Contributor address; City; St Houston, TX 77041)		Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				
	Date 11/13/2024	Full name of contributor Blackridge Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$2,500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/49 Rpt: 9/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/23/2024	Boating Trade Association of Metro Houston PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_	<u> </u>	Houston, TX 77054				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Brentwood Public Affairs Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Butler Snow LLP Contributor address; City; State; Zip Code Ridgeland, MS 39158-6010)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Carriage House Partners LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/22/2024	Full name of contributor out-of-state PAC (ID#:_ Caterpillar Employees PAC Contributor address; City; State; Zip Code Irving, TX 75039)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CO	NS 		SCHEDULE A1		
	The Instru	ction Guide explains how t	o complete this fo	rm.	1	Total pages Schedule A1: Sch: 7/49 Rpt: 10/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/13/2024	 Full name of contributor Centene Corporation PAC Contributor address; City; State 	out-of-state PAC (ID#: <u>CC</u> e; Zip Code	0397851)	7	Amount of Contribution (\$)	\$1,000.00
		St. Louis, MO 63105					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 11/13/2024	Full name of contributor Charter Communications In Contributor address; City; State)		Amount of Contribution (\$)	\$10,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/23/2024	Full name of contributor Chevron Employees PAC Contributor address; City; State San Ramon, CA 94583	out-of-state PAC (ID#: <u>CC</u> e; Zip Code	00035006		Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 09/05/2024	Full name of contributor Cobb Fendley PAC Contributor address; City; State Houston, TX 77041				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 08/05/2024	Full name of contributor Colyandro, John (Mr.) Contributor address; City; State Austin, TX 78731	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/49 Rpt: 11/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/13/2024	 Full name of contributor	C00248716)	7	Amount of Contribution (\$)	\$1,000.00
_		Philadelphia , PA 19103				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Conklin, David (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Dringing aggr	Lubbock, TX 79424	Employer (See Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/23/2024	Full name of contributor X out-of-state PAC (ID#: ConocoPhillips Spirit PAC Contributor address; City; State; Zip Code	C00112896)		Amount of Contribution (\$)	\$2,500.00
		Bartlesville, OK 74004				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor X out-of-state PAC (ID#: Constellation Employee PAC Contributor address; City; State; Zip Code Washington, DC 20001	C00793711)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Consulting Engineers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/49 Rpt: 12/114			
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)		
4	Date 11/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00		
_	Dringing! goog	Austin, TX 78701	Employer (Coo Instructions					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)				
	Date 10/17/2024	Full name of contributor			Amount of Contribution (\$)	\$500.00		
	Principal occu	Canyon, TX 79015 pation / Job title (See Instructions)	Employer (See Instructions					
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions)				
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ EDF Action Texas PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78701						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_EMPACT Contributor address; City; State; Zip Code Austin , TX 78701)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ENPAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 10/49 Rpt: 13/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	on Filers)	
4	Date 12/05/2024	5 Full name of contributor Elevance Health PAC6 Contributor address; City; St	x out-of-state PAC (ID#: Cate; Zip Code	000197228)	7	Amount of Contribution (\$)	\$4,000.00	
_	Daine in a la casa	Washington, DC 20004	,	O Faralana (Caralantantina				
8	Principal occu	pation / Job title (See Instructions	5)	9 Employer (See Instructions	5)			
	Date 11/13/2024	Full name of contributor Essential Utilities Inc PAC Contributor address; City; Si		C00340455)		Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Bryn Mawr, PA 19010 pation / Job title (See Instructions	2)	Employer (See Instructions	.)			
	r inicipal occu	pation / 300 title (See Instructions	,,	Employer (See Instructions	')			
	Date 08/27/2024	Full name of contributor ExxonMobil PAC Contributor address; City; Si	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00	
		Irving , TX 75039						
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	i)			
	Date 11/13/2024	Full name of contributor Foley & Lardner LLP Contributor address; City; Si Dallas, TX 75201)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u>			
	Date 12/13/2024	Full name of contributor Ford, Curtis (Mr.) Contributor address; City; Si Austin, TX 78746	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5,000.00	
	Principal occu President	pation / Job title (See Instructions	5)	Employer (See Instructions Media Choice	i)			
			'					

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 11/49 Rpt: 14/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commissi 00066066	on Filers)	
4	Date 11/23/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25,000.00	
		Midland, TX 79705					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)			
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Freese and Nichols PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00	
	Principal occu	Fort Worth, TX 76102 pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 12/13/2024	Full name of contributor 🗵 out-of-state PAC (ID#: C Gainwell PAC Contributor address; City; State; Zip Code Conway, AR 72034	000440453		Amount of Contribution (\$)	\$4,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)			
	Date 11/13/2024	Full name of contributor	00199257		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Date 07/19/2024	Full name of contributor out-of-state PAC (ID#:_ Golden Spread Political Action Committee Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDUI	E A1
	The Instru	ction Guide explains how t	o complete this forr	n.	1	Total pages Schedule A1: Sch: 12/49 Rpt: 15/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/11/2024	5 Full name of contributor Gregory, Bob (Mr.)6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)	7	Amount of Contribution (\$)	\$2,000.00
_		Austin, TX 78747	- In				
8	CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Texas Disposal Systems			
	Date 11/22/2024	Full name of contributor HEB PAC Contributor address; City; State)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	San Antonio, TX 78204 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/13/2024	Full name of contributor HMWK LLC Contributor address; City; State Austin, TX 78701	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 09/05/2024	Full name of contributor HNTB Holdings LTD PAC Contributor address; City; State Kansas City , MO 64105	out-of-state PAC (ID#: C00	386029		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/10/2024	Full name of contributor HOSPAC - State Contributor address; City; State Austin, TX 78701-2180	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			,				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/49 Rpt: 16/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)	
4	Date 08/06/2024	5 Full name of contributor out-of-state PAC (ID#:_ HS Law PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$2,500.00	
8	Principal occu	Austin, TX 78701 spation / Job title (See Instructions)	9 Employer (See Instructions)			
	i illicipai occu	pation / sob title (see instructions)	Employer (See Instructions	,			
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_Haliburton Company PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00	
	Principal occu	Houston, TX 77072 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 09/07/2024	Full name of contributor out-of-state PAC (ID#:_ Hall, Cheryl Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$104.10	
		Lubbock, TX 79410					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_Hance, Kent (Mr.) Contributor address; City; State; Zip Code Lubbock, TX 79409			Amount of Contribution (\$)	\$2,500.00	
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Hance & Scarborough L				
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ Hance, Kent (Mr.) Contributor address; City; State; Zip Code Lubbock, TX 79409			Amount of Contribution (\$)	\$2,500.00	
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Hance & Scarborough L				

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/49 Rpt: 17/114			
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	ı Filers)		
4	Date 07/01/2024	5 Full name of contributor out-of-state PAC (ID#:_ Harris, Jessica 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$20.82		
_	Deignaignal annu	Lubbock, TX 79413	O Francis var (Cap Instructions					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)				
	Date 08/01/2024	Full name of contributor out-of-state PAC (ID#:_ Harris, Jessica Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.82		
	Principal occu	Lubbock, TX 79413 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>				
		,	, ,, ,	,				
	Date 09/01/2024	Full name of contributor out-of-state PAC (ID#:_ Harris, Jessica Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.82		
		Lubbock, TX 79413						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)				
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_ Harris, Jessica Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.82		
	Principal occu	Lubbock, TX 79413 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>				
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ Harris, Jessica Contributor address; City; State; Zip Code Lubbock, TX 79413)		Amount of Contribution (\$)	\$20.82		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>				

	MONET	ARY POLITICAL CON	ITRIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to c	omplete this forr	n.	1	Total pages Schedule A1: Sch: 15/49 Rpt: 18/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 08/06/2024	 Full name of contributor x ou Health Care Service Corp Empl Contributor address; City; State; Zi 		199711)	7	Amount of Contribution (\$)	\$1,500.00
		Chicago, IL 60601					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 10/17/2024	Full name of contributor ou Heath, Brian (Mr.) Contributor address; City; State; Zi	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	<u> </u>	Fredricksburg, TX 78624					
	Owner	pation / Job title (See Instructions)		Employer (See Instructions Grape Creek Vineyards)		
	Date 07/25/2024	Full name of contributor ou Heinrich , Bobbye Contributor address; City; State; Zi	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$52.05
		Lubbock, TX 79423					
	Principal occu VP	pation / Job title (See Instructions)		Employer (See Instructions University Medical Cent			
	Date 08/25/2024	Full name of contributor ou Heinrich , Bobbye Contributor address; City; State; Zi Lubbock, TX 79423	ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$52.05
	Principal occu VP	pation / Job title (See Instructions)		Employer (See Instructions University Medical Center			
	Date 09/25/2024	Full name of contributor ou Heinrich , Bobbye Contributor address; City; State; Zi Lubbock, TX 79423	ut-of-state PAC (ID#: ip Code)		Amount of Contribution (\$)	\$52.05
	Principal occu VP	pation / Job title (See Instructions)		Employer (See Instructions University Medical Cente			
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 16/49 Rpt: 19/114
2	FILER NAME Perry, Charle	es L. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00066066
4	Date 10/25/2024	5 Full name of contributor out-of-state PAC (ID#:_ Heinrich , Bobbye 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$52.05
		Lubbock, TX 79423		
8	Principal occu VP	pation / Job title (See Instructions)	9 Employer (See Instructions) University Medical Center	
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ Heinrich , Bobbye Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$52.05
	Deire size al. a servi	Lubbock, TX 79423	Foreland (Control Instruction)	
	VP	pation / Job title (See Instructions)	Employer (See Instructions) University Medical Cente	
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ Hildebrand, Jeffery (Mr.) Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$10,000.00
		Houston, TX 77251		
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions) Hilcorp Energy Company	,
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_HillCo PAC Contributor address; City; State; Zip Code Austin, TX 78701		Amount of Contribution (\$) \$5,000.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions))
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Hochheim Prairie PAC Contributor address; City; State; Zip Code Yoakum, TX 77995		Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/49 Rpt: 20/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)	
4	Date 11/21/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00	
_	Deignaignal annu	Dallas, TX 75201	O Francis var (Cas Instructions				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date 11/13/2024	Full name of contributor)		Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Homepac of Texas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Pilots PAC Contributor address; City; State; Zip Code Deer Park, TX 77536			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/04/2024	Full name of contributor x out-of-state PAC (ID#: Gild Humana Inc PAC Contributor address; City; State; Zip Code Louisville, KY 40202	C00271007)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/49 Rpt: 21/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)	
4	Date 11/13/2024	5 Full name of contributor out-of-state PAC (ID#: IATSE Local 484 PAC Fund 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00	
_	Deinainal agai	Austin, TX 78741	C. Franks voy (Cook know obione)				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ IBAT PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)			
	- 1	,	, ,, , , , , , , , , , , , , , , , , , ,	,			
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ IDS Engineering Group PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00	
		Houston, TX 77040					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_INDEPAC Contributor address; City; State; Zip Code Austin, TX 78750			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Invenergy Investment Company LLC Contributor address; City; State; Zip Code Chicago, IL 60606			Amount of Contribution (\$)	\$1,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/49 Rpt: 22/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commissi 00066066	on Filers)
4	Date 10/28/2024	5 Full name of contributor out-of-state PAC (ID#:_ Irwin, Barbara 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_		Lorenzo, TX 79343				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/06/2024	Full name of contributor out-of-state PAC (ID#:_ JES Holdings LLC - TX Development PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10,000.00
	Principal occu	Columbia, MO 65203 pation / Job title (See Instructions)	Employer (See Instructions			
,			Employer (See Managina)	,		
	Date 11/23/2024	Full name of contributor)		Amount of Contribution (\$)	\$5,000.00
		Columbia, MO 65203				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Jackson Walker LLP PAC Contributor address; City; State; Zip Code Dallas, TX 75201)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/01/2024	Full name of contributor	(200010983		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 20/49 Rpt: 23/114
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00066066
4	Date 10/30/2024	 Full name of contributor		7	Amount of Contribution (\$) \$500.00
_	Deinsinal	Austin, TX 78759	lo Familia (Carabatana)		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)	
	Date 12/10/2024	Contributor address; City; State; Zip Code	*:)		Amount of Contribution (\$) \$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)	
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID: K&L Gates LLP Contributor address; City; State; Zip Code	*:)		Amount of Contribution (\$) \$2,500.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)	
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID: Kickapoo Traditional Tribe of Texas Contributor address; City; State; Zip Code Eagle Pass, TX 78852	<u>*:)</u>		Amount of Contribution (\$) \$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)	
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID: Kimber, Sheldon (Mr.) Contributor address; City; State; Zip Code Houston, TX 77098	' :)	•	Amount of Contribution (\$) \$2,000.00
	Principal occu CEO	pation / Job title (See Instructions)	Employer (See Instructions Intersect Power	s)	
			•		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/49 Rpt: 24/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 10/28/2024	5 Full name of contributor out-of-state PAC (ID#:_Landon, Kathryn 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_	Daine in all a second	Allen, TX 75013	D. Faralassa (Garalassa Saratassa)			
8	Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78760 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ Lloyd, Gosselink, Rochelle & Townsend, P.C. Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Longbow Consulting Partners LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Lubbock Fire Fighters PAC Contributor address; City; State; Zip Code Lubbock, TX 79464			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 22/49 Rpt: 25/114	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Perry, Charl	es L. (The Honorable)			00066066	
4	Date 12/10/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
		Lubbock, TX 79424	,			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date	Full name of contributor ut-of-state PAC (ID#:			Amount of Contribution (\$)	
	12/10/2024	Madison, Ronald (Mr.)				\$1,000.00
		Contributor address; City; State; Zip Code				
		Lubbock, TX 79424				
	Principal occupation / Job title (See Instructions) Business Owner		Employer (See Instructions Self	s)		
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/13/2024	Manufacturers PAC of Texas Contributor address; City; State; Zip Code				\$2,000.00
		Austin, TX 78711				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor ut-of-state PAC (ID#:			Amount of Contribution (\$)	
	09/05/2024	McCune, Andrew (Mr.)				\$250.00
		Contributor address; City; State; Zip Code				
	5	Ann Arbor, MI 48108	-	<u> </u>		
	Рппсіраї оссі	upation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/13/2024	McGuireWoods LLP				\$1,000.00
		Contributor address; City; State; Zip Code				
	Principal occu	Richmond, VA 23219 upation / Job title (See Instructions)	Employer (See Instructions	s)		
	. morpai occi	passon, oob also (oob mondestone)	Employer (GGG manucilons	-,		
_						

	MONET	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 23/49 Rpt: 26/114			
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	on Filers)		
4	Date 11/13/2024	5 Full name of contributor McKesson Corp. Employe6 Contributor address; City; Sta		00108035	7	Amount of Contribution (\$)	\$1,500.00		
8	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)		9 Employer (See Instructions	<u> </u>				
_	Date 12/13/2024	Full name of contributor Moak Casey PAC Contributor address; City; Sta	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)				
	Date 10/24/2024	Full name of contributor Montford, John (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$2,500.00		
	Principal occu	San Antonio, TX 78257 pation / Job title (See Instructions) EO		Employer (See Instructions JTM Consulting LLC	5)				
	Date 12/10/2024	Full name of contributor Morris, Joseph (Mr.) Contributor address; City; Sta	out-of-state PAC (ID#:_ tte; Zip Code)		Amount of Contribution (\$)	\$250.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)				
	Date 12/13/2024	Full name of contributor Motorola Solutions Inc PA Contributor address; City; Sta Washington, DC 20004		C00075341)		Amount of Contribution (\$)	\$2,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/49 Rpt: 27/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/13/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Cranford, NJ 07016 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
_				,		
	Date 08/06/2024	Full name of contributor			Amount of Contribution (\$)	\$2,500.00
		Fort Worth, TX 76107				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ NCHA's Texas Events PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Fort Worth, TX 76107				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date Full name of contributor x out-of-state PAC (ID#: C00366559) 11/13/2024 NRG Energy PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00	
	Principal occu	Princeton, NJ 08540 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/23/2024	Full name of contributor x out-of-state PAC (ID#: CONTRIBUTION OF STATE PAC (ID#: CONTRIBUTION	000022368		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/49 Rpt: 28/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 07/19/2024	5 Full name of contributor out-of-state PAC (ID#:_ Nelson, James (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,000.00
_		Midland, TX 79705	10 - 1 (0 1 1 1			
8	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Warren CAT)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Oberhoff, Donica Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	San Antonio, TX 78258 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor PAC Contributor address; City; State; Zip Code Dallas, TX 75202			Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Oneok Employees PAC Contributor address; City; State; Zip Code Tulsa, OK 74102			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Organizing for Texas Seniors Contributor address; City; State; Zip Code Dallas, TX 75231			Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/49 Rpt: 29/114	
2	FILER NAME Perry, Charl	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ PAC of the Independent Insurance Agents of Te 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5,000.00
•	Dringing Lagge	Austin, TX 78768	D. Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ PCC PAC)		Amount of Contribution (\$)	\$7,500.00
	Directors	Lewisville, TX 75057				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_Pape-Dawson Engineers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
		San Antonio, TX 78213				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Parkhill PAC Contributor address; City; State; Zip Code Lubbock, TX 79423			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/10/2024	Full name of contributor x out-of-state PAC (ID#: 9 Parsons Corporation PAC Contributor address; City; State; Zip Code Pasadena, CA 91124	C00103549)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/49 Rpt: 30/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 10/23/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,000.00
•	Dringing! goog	Lubbock, TX 79408	O Employer (Con Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/13/2024	Full name of contributor X out-of-state PAC (ID#: C Pfizer PAC Contributor address; City; State; Zip Code New York, NY 10001	C00016683)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: PharmPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78757 pation / Job title (See Instructions)	Employer (See Instructions)		
		panon, cos uno (coo monatanone)		,		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: Poinsett PLLC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ Populus Financial Group Inc Texas PAC Contributor address; City; State; Zip Code Irving, TX 75062)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	NETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 28/49 Rpt: 31/114			
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)		
4	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Prime Therapeutics LLC Employee PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00		
_		Eagan, MN 55121						
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))				
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Read, Teddye Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00		
	Principal occu	San Angelo, TX 76904 upation / Job title (See Instructions)	Employer (See Instructions					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Riceland Consulting LLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00		
		Eagle Lake, TX 77434						
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)				
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Robison, Douglass (Mr.) Contributor address; City; State; Zip Code Abilene, TX 79605)		Amount of Contribution (\$)	\$5,000.00		
	Principal occu Founder/Pre	upation / Job title (See Instructions) esident	Employer (See Instructions Natura Resources LLC)				
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ Rodriguez, Marc (Mr.) Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$2,500.00		
	Principal occu Lobbyist	ipation / Job title (See Instructions)	Employer (See Instructions Self)				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 29/49 Rpt: 32/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/13/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$520.51
_	<u> </u>	Austin, TX 78705				
8	Principal occu President	pation / Job title (See Instructions)	9 Employer (See Instructions Tx Assn of Broadcasters			
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Ron Lewis & Associates Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 spation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	i illicipai occa	pation 7 oob title (oce mataetions)	Employer (See mandellons	,		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#: Rose, Matthew (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,602.54
		Roanoke, TX 76262				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 10/04/2024	Full name of contributor out-of-state PAC (ID#:_ Rosenzweig, Robin Lynn Contributor address; City; State; Zip Code Boca Raton, FL 33434			Amount of Contribution (\$)	\$2,500.00
	Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Rural Friends of Electric Cooperatives Contributor address; City; State; Zip Code Austin, TX 78701-2100)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 30/49 Rpt: 33/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commissi 00066066	on Filers)
4	Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ Ryan Texas PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$15,000.00
	Duit single one	Dallas, TX 75240	2. Frankriger (Cas Instructions			
8	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	s) 		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Rydman, John (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77007 pation / Job title (See Instructions)	Employer (See Instructions			
	Principal occu President	pation / Job title (See instructions)	SPEC's	·)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Sabine Pilots PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
L		Port Arthur, TX 77640				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	s)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_Schrock, Jennifer Contributor address; City; State; Zip Code Austin, TX 78733)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	s)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Scope PAC Contributor address; City; State; Zip Code Amarillo, TX 79101			Amount of Contribution (\$)	\$3,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)	<u>l</u> S)		

	MONET	ARY POLITICAL (CONTRIBUTION	NS		SCHEDU	LE A1
	The Instruc	ction Guide explains hov	v to complete this for	m.	1	Total pages Schedule A1: Sch: 31/49 Rpt: 34/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)			3	Filer ID (Ethics Commission 00066066	ion Filers)
4	Date 11/13/2024	5 Full name of contributor Scott, James (Mr.)6 Contributor address; City; S	out-of-state PAC (ID#:tate; Zip Code		7	Amount of Contribution (\$)	\$2,000.00
_	Deinsinal sass	Beaumont, TX 77705	-) lo	Franks var (Cas krativ stiere	_		
8	Principal occu President	pation / Job title (See Instruction:	S) 9	Employer (See Instructions Trans-Global Solutions			
	Date 11/13/2024	Full name of contributor Scott, William (Mr.) Contributor address; City; S				Amount of Contribution (\$)	\$2,000.00
	Principal occu	Nederland, TX 77627 pation / Job title (See Instruction:	s)	Employer (See Instructions	<u> </u>		
	CEO			Trans-Global Solutions	Inc		
	Date 11/13/2024	Full name of contributor Scott II, William (Mr.) Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code			Amount of Contribution (\$)	\$2,000.00
		Beaumont, TX 77705					
	Principal occu President	pation / Job title (See Instructions	s)	Employer (See Instructions Trans-Global Solutions			
	Date 11/13/2024	Full name of contributor Sharma, Devesh Contributor address; City; S Washington, PA 15301	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions)		
	Date 09/05/2024	Full name of contributor Sledge Law and Public S Contributor address; City; S Austin, TX 78701				Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instruction:	s)	Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/49 Rpt: 35/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 09/05/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
_	<u> </u>	Cedar Park, TX 78613				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_SorgoPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Salado, TX 76571 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occa	pation 7 vob title (oce monucions)	Employer (See Manacions	,		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Sysco Corporation for Good Government Comm Contributor address; City; State; Zip Code	nittee, Inc.		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77077				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ TALAPAC Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ TBA Bank PAC Contributor address; City; State; Zip Code Austin , TX 78701)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 33/49 Rpt: 36/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	n Filers)
4	Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ TNLA PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$3,000.00
8	Principal occu	Austin, TX 78745-6698 pation / Job title (See Instructions)	Employer (See Instructions			
0	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ TREPAC Contributor address; City; State; Zip Code Austin, TX 78768-2246			Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: TSAPAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$3,000.00
	Principal occu	Austin , TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#:_ TSHP PAC Contributor address; City; State; Zip Code Round Rock, TX 78665			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ TX & SW Cattle Raisers Association Contributor address; City; State; Zip Code Fort Worth , TX 76102-2665)		Amount of Contribution (\$)	\$10,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/49 Rpt: 37/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 09/05/2024	5 Full name of contributor out-of-state PAC (ID#:_ TX Chiropractic Association 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$2,000.00
•	Dringing! good	Austin, TX 78701	0 Employer (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ TXANA PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ TXWIN PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78766				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Tamft Family PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Tenaska Employees Texas PAC Contributor address; City; State; Zip Code Omaha, NE 68154-4446)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/49 Rpt: 38/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/23/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Lawsuit Reform PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$30,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Reasonable Solutions PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78741 pation / Job title (See Instructions)	Employer (See Instructions			
	r incipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Aggregates & Concrete Ass. PAC Contributor address; City; State; Zip Code Round Rock, TX 78681)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Agricultural Aviation Ass. PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 36/49 Rpt: 39/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 09/18/2024	Full name of contributor		7	Amount of Contribution (\$)	\$2,000.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Alliance for Conservation PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Alliance for Life PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78754 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Apartment Association PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans PAC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 37/49 Rpt: 40/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/13/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$750.00
_		Midland, TX 79706				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch AGC PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 spation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Texas DENPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78704 Ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Deer Association PAC Contributor address; City; State; Zip Code Austin, TX 78703)		Amount of Contribution (\$)	\$15,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Food & Fuel Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION)NS		SCHEDUL	_E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 38/49 Rpt: 41/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 09/06/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
_		Lufkin, TX 75902	1	Ĺ		
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Health Care Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions)	.)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Lobby Partners LLP Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78701	1	L		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas McDonald's Operators Association PAC Contributor address; City; State; Zip Code Athens, TX 75751			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,000.00
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions	.)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/49 Rpt: 42/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/04/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas Mortgage Bankers PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00
_	Deignaignal annu	Austin, TX 78701	O Franks or (Cas Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Nurse Practitioners PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	Austin, TX 78735 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Our Texas PAC Contributor address; City; State; Zip Code Austin, TX 78767			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Physicians For Patients PAC Contributor address; City; State; Zip Code Marble Falls, TX 78654)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 40/49 Rpt: 43/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/13/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Poultry PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions)	Employer (See Instructions			
	r inicipal occu	pation / 300 title (See Instructions)	Employer (See instructions	,		
	Date 12/12/2024	Full name of contributor)		Amount of Contribution (\$)	\$750.00
		Mission, TX 78572				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Psychological Association PAC Contributor address; City; State; Zip Code Austin, TX 78757)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Architects Committee Contributor address; City; State; Zip Code Austin, TX 78702			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 41/49 Rpt: 44/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/12/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	.)		
•	r incipal occu	pation / 300 title (See Instructions)	5 Employer (See Instructions	')		
	Date 12/13/2024	Full name of contributor)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
		,		,		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#: Texas Telephone Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78701				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Towing and Storage Association PAC Contributor address; City; State; Zip Code Spring, TX 77386			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Assc. PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 42/49 Rpt: 45/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/13/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
0	Principal occu	Austin, TX 78701	Employer /See Instructions			
0	Pilicipai occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 09/03/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Wildlife Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		New Braunfels, TX 78132				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#: Texas Wine & Grape Growers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78757				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/16/2024	Full name of contributor out-of-state PAC (ID#:_ TexasNurse PAC Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 43/49 Rpt: 46/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 11/23/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	i illoipai ooda		c Employer (See Metactions	,		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#: The Texas Cotton Association Fund Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Dringing aggr	Dallas, TX 75376	Employer (Co.) Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: The Texas State University System PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78767				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ The US Oncology Network PAC Contributor address; City; State; Zip Code The Woodlands, TX 77380)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor x out-of-state PAC (ID#: C The Williams Companies Inc PAC Contributor address; City; State; Zip Code Tulsa, OK 74172	00040394		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 44/49 Rpt: 47/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/14/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Bridge City, TX 77611 pation / Job title (See Instructions)	9 Employer (See Instructions)	`		
•	Fillicipal occu	pation / 300 title (See Instructions)	Employer (See Instructions	,		
	Date 11/13/2024	Full name of contributor X out-of-state PAC (ID#:\(\) Toyota/Lexus PAC Contributor address; City; State; Zip Code	C00542365)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Tread Coalition PAC Contributor address; City; State; Zip Code Austin, TX 78737			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Tredway, CJ (Mr.) Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$520.51
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions) Self)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ Tuma, Pepin Contributor address; City; State; Zip Code Great Falls, VA 22066			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/49 Rpt: 48/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 10/17/2024	5 Full name of contributor out-of-state PAC (ID#:_ Turner, Bric (Mr.) 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$104.10
_	Deinsinal	Meadow, TX 79345	O Frankrije (Con hotersting)			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor X out-of-state PAC (ID#: UCB Inc PAC Contributor address; City; State; Zip Code	C00571141)		Amount of Contribution (\$)	\$500.00
	Principal occu	Sausalito, CA 94965 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024	Full name of contributor x out-of-state PAC (ID#: UPSPAC Contributor address; City; State; Zip Code	C00064766)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Washington, DC 20003 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ USAA Employee PAC Contributor address; City; State; Zip Code San Antonio, TX 78288)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ United Supermarkets PAC Contributor address; City; State; Zip Code Lubbock, TX 79493			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 46/49 Rpt: 49/114	
2	FILER NAME Perry, Charl	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 10/28/2024	5 Full name of contributor out-of-state PAC (ID#:) University of Houston PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$2,500.00
_		Houston, TX 77046				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 10/23/2024				Amount of Contribution (\$)	\$100.00
	Principal occu	Smyer, TX 79376 upation / Job title (See Instructions)	Employer (See Instructions)		
	•	, ,				
	Date Full name of contributor out-of-state PAC (ID#:) 11/13/2024 Valdez, Jerry (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,041.02	
		Austin, TX 78711				
	Principal occu Consultant	pation / Job title (See Instructions)	Employer (See Instructions Self)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/13/2024 Veternary PAC Contributor address; City; State; Zip Code Austin, TX 78754				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/13/2024				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 47/49 Rpt: 50/114		
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/13/2024			7	Amount of Contribution (\$)	\$2,500.00
0	Dringing occur	Austin, TX 78701 spation / Job title (See Instructions)	Employer /See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)) 		
	Date 12/10/2024				Amount of Contribution (\$)	\$1,000.00
	Dringinal occu	Lubbock, TX 79407 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/09/2024 Weekley, Richard (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77027				
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions) Self)		
	Date 09/05/2024	Full name of contributor out-of-state PAC (ID#:_ Westwood PAC Contributor address; City; State; Zip Code Plano, TX 75093)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:_ Wexler, Adam (Mr.) Contributor address; City; State; Zip Code Miami, FL 33130			Amount of Contribution (\$)	\$1,500.00
	Principal occu Chairman of	pation / Job title (See Instructions) the Board	Employer (See Instructions Prize Picks)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 48/49 Rpt: 51/114	
2	FILER NAME Perry, Charle	es L. (The Honorable)		3	Filer ID (Ethics Commission 00066066	on Filers)
4	Date 12/10/2024			7	Amount of Contribution (\$)	\$500.00
_		Lubbock, TX 79423				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 11/21/2024				Amount of Contribution (\$)	\$500.00
	Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions					
	Date 10/28/2024	28/2024 Williams, Kirk Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Lubbock, TX 79424 spation / Job title (See Instructions)	Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/28/2024 Wilmeth, Ty (Mr.) Contributor address; City; State; Zip Code Brownfield, TX 79316				Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024				Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDU	ULE A1	
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 49/49 Rpt: 52/114		
2	FILER NAME Perry, Charle	ER NAME rry, Charles L. (The Honorable)			Filer ID (Ethics Commiss 00066066	sion Filers)
4	Date 12/13/2024				Amount of Contribution (\$)	\$5,000.00
•	Duinning Langu	Austin, TX 78701	O Familia var (Cara Instructiona			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	Date 11/23/2024	Full name of contributor out-of-state PAC (ID#:_ Winn, Stephen (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10,000.00
	Principal occu	Dallas, TX 75219 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	President/CEO RealPage Inc					
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$250.00
		Plano, TX 75023				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/10/2024	Full name of contributor \(\times\) out-of-state PAC (ID#: \(\times\) Zeneca Inc PAC Contributor address; City; State; Zip Code Wilmington, DE 19850	C00279455)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/35 Rpt: 53/114	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	10/24/2024	Aaron Kinsey Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	PO Box 605
		Midland, TX 79702
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	EXI ENDITORE	Candidate/Officeholder/Political Committee
		Campaign Contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_	Date	Power name
	07/24/2024	Payee name America For Isreal
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3207 66th Street
		Lubbock, TX 79413
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Sponsor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	₹
	Date	Payee name
	07/24/2024	Anson Chamber of Commerce
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	PO Box 351
		Anson, TX 79501
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Cry Scale Categories instead at the top of this schedule) Cry Scale Categories instead at the top of this schedule) Cry Scale Categories instead at the top of this schedule) Cry Scale Categories instead at the top of this schedule)
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Chamber Dues
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitire to beliefit C/OI	<u>'</u>

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/35 Rpt: 54/114	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	11/12/2024	Arnwine, Adam (Mr.)
6	Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 9801 Stonelake Blvd. Apt 1716
		Austin, TX 78759
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Bonus
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	07/01/2024	Berry Communications, LLC
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1014 W Milton Ave. Austin, TX 78704
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Management Services
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date 08/01/2024	Payee name Berry Communications, LLC
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 1014 W Milton Ave.
		Austin, TX 78704
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Management Services
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

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 T	otal pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
S	Sch: 3/35 Rpt: 55/114	Perry, Charles L. (The Honorable)	00066066				
4 D	ate	5 Payee name					
0	9/03/2024	Berry Communications, LLC					
6 A	smount (\$) \$2,000.00	7 Payee address; City; State; Zip Code 1014 W Milton Ave. Austin, TX 78704					
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel of the contract Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense anagement Services				
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
D	ate	Payee name					
1	0/01/2024	Berry Communications, LLC					
Ā	mount (\$)	Payee address; City; State; Zip Code					
	\$2,000.00 1014 W Milton Ave. Austin, TX 78704						
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense anagement Services				
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
	Pate	Payee name					
	1/01/2024	Berry Communications, LLC					
A	s2,000.00	Payee address; City; State; Zip Code 1014 W Milton Ave.					
		Austin, TX 78704					
ļ	PURPOSE OF EXPENDITURE	Check if Austin,	nutside of Texas. Complete Schedule T. TX, officeholder living expense anagement Services				
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services		Vages	/Contract Labor		OTHER (enter a	category not listed al	oove)
			The Instruction Guide exp	iains now to co	mpie	ete this form.	_			
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 4/35 Rpt: 56/114	Perry, Cha	rles L. (The Honorable)					00066066		
4	Date	5 Payee name	?							
	12/02/2024	Berry Com	munications, LLC							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	de					
	\$2,000.00	1014 W Mi	lton Ave.							
		Austin, TX	78704							
8	PURPOSE				(b)	Description				
Ū	OF		See Categories listed at the top of to ages/Contract Labor	nis schedule)	()		outsi	de of Texas. Com	olete Schedule T.	
	EXPENDITURE	Salaries, W	ages/contract Labor			_		officeholder living		
						Campaign Ma	ana	agement Ser	vices	
9	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	H								
	Date	Payee name)							
	11/12/2024	Callan, Ro	o (Mr.)							
	Amount (\$)	Payee addre	ess; City; S	State; Zip Co	de					
	\$2,500.00	1316 Towr	Center Drive							
		Apt. #3946								
		Pflugerville	, TX 78660							
	PURPOSE		See Categories listed at the top of t		(b)	Description				
	OF		ages/Contract Labor	nis scnedule)	(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE	Salaries, W	ages/contract Labor			Check if Austin,	, TX	officeholder living	expense	
						Staff Bonus				
	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	H								
	Date	Payee name)							
	10/18/2024	Carl Shaw	Campaign							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$250.00	PO Box 51								
		Idalou, TX	79329							
	PURPOSE	(a) Category (s	See Categories listed at the top of t	his schedule)	(b)	Description				
	OF EXPENDITURE		ns/Donations Made By	,			outsi	de of Texas. Com	olete Schedule T.	
	EXPENDITORE	Candidate/	Officeholder/Political C	ommittee				officeholder living	expense	
						Campaign Co	onti	ribution		
	Complete ONLY if direct expenditure to benefit C/OI		ficeholder name	Office sou	ght			Office he	eld	
	experience to beliefft C/OI	•								

SCHEDULE F1

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

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

se Travel in Dist
nse Travel Out of
es/Contract Labor OTHER (ente

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/35 Rpt: 57/114	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	08/16/2024	Chase Card Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,902.12	PO Box 94014
		Palatine, IL 60094
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
		Ground Gura Laymont
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/18/2024	Chase Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,750.49	PO Box 94014
		Palatine, IL 60094
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
		Ground Gura Laymont
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	10/18/2024	Chase Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,637.56	PO Box 94014
	Ψ2,001.00	1 0 200 34014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Payment
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	•	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Services

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/35 Rpt: 58/114	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	11/17/2024	Chase Card Services
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,111.51	PO Box 94014
		Palatine, IL 60094
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/17/2024	Chase Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$9,191.91	PO Box 94014
		Palatine, IL 60094
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit Card Payment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/31/2024	Chase Card Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$10,770.18	PO Box 94014
		Palatine, IL 60094
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Credit Card Payment Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense Credit Card Payment
		Great Cara Payment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/35 Rpt: 59/114	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	09/20/2024	Childress Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$60.00	237 Commerce St.
		Chilress, TX 79201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Chamber Dues
		Chamber Bacs
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	07/31/2024	First Bank & Trust
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	9816 Slide Road
	Ψ0.00	3010 Glide Nodd
		Lubbock, TX 79424
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Bank Service Charge
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit Grot	'
	Date	Payee name
	08/31/2024	First Bank & Trust
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.00	9816 Slide Road
		Lubbock, TX 79424
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Bank Service Charge
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 8/35 Rpt: 60/114	2 FILER NAME Perry, Charles L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00066066	
4	Date 09/30/2024	5 Payee name First Bank & Trust	
6	Amount (\$) \$5.00	7 Payee address; City; State; Zip Code 9816 Slide Road Lubbock, TX 79424	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 10/31/2024	Payee name First Bank & Trust	
	Amount (\$) \$5.00	Payee address; City; State; Zip Code 9816 Slide Road Lubbock, TX 79424	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date 11/30/2024	Payee name First Bank & Trust	
	Amount (\$) \$5.00	Payee address; City; State; Zip Code 9816 Slide Road	
		Lubbock, TX 79424	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Service Charge	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			Travel Out of Dis OTHER (enter a	strict category not listed above)
	oroan oara'r aymon	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
	Sch: 9/35 Rpt: 61/114	Perry, Charles L. (The Honorable)		00066066	
4	Date	5 Payee name			
	12/31/2024	First Bank & Trust			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$5.00	9816 Slide Road			
		Lubbock, TX 79424			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF	_ ·	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE	l =	, TX,	officeholder living	expense
		Bank Service	Cł	narge	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought		Office he	eld
	expenditure to benefit C/OI	1			
	Date	Payee name			
	10/24/2024	First Priority			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.00	PO Box 11221			
		Odessa, TX 79760			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF		outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		, TX,	officeholder living	expense
		Donation			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office he	eld
	experiditure to benefit C/Oi	1			
	Date	Payee name			
	11/22/2024	Fleher, Lizette			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$2,500.00	2312 Pruett Street			
		Austin, TX 78703			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Salaries/Wages/Contract Eabor			plete Schedule T.
	EXI ENDITORE		, TX,	officeholder living	expense
		Staff Bonus			
	Commiste Chilly " "	Condidate/Officeholder news		O#: '	al al
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought		Office he	eiu

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 10/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	12/20/2024	Fleher, Lizette
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$423.80	2312 Pruett Street
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Expense Reimbursement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	11/12/2024	Foster, Jennifer
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	16940 FM 268
		Childress, TX 79201
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Staff Bonus
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	4
	Date	Payee name
	12/11/2024	Foster, Jennifer
	Amount (\$)	Payee address; City; State; Zip Code
	\$239.53	16940 FM 268
		Childress, TX 79201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Retreat Expenses
		Stan Netreat Expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift/Awards/Memorials Expense ommittee Legal Services The Instruction Guide explain		ges/Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)
ㄴ		<u> </u>	3 HOW to Com	piete tilis ioiili.	_		
1	Total pages Schedule F1: Sch: 11/35 Rpt:	FILER NAME Perry, Charles L. (The Honorable)			3	Filer ID 00066066	(Ethics Commission Filers)
Ŀ	·						
4	Date	Payee name					
l	11/12/2024	Grove, Jayna					
6	Amount (\$)	Payee address; City; Stat	e; Zip Code	<u>.</u>			
	\$2,500.00	1400 Royal Crest Drive	.o,p				
l	Ψ2,300.00						
		Apt 357					
		Austin, TX 78741					
8	PURPOSE	A) Category (See Categories listed at the top of this s	-1	Description			
ľ	OF	Salaries/Wages/Contract Labor	cnedule)	_	outs	ide of Texas. Com	plete Schedule T.
l	EXPENDITURE	Salaries/Wages/Cornilact Labor				, officeholder living	
l				Staff Bonus			,
l							
Ļ							
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name	Office sough	nt		Office he	eld
	experialture to beliefit C/Oi						
	Date	Payee name					
	12/26/2024	Harland Clarke					
_			7:- OI				
	Amount (\$)	•	e; Zip Code	2			
	\$255.15	10931 Laureate Drive					
		San Antonio, TX 78249					
H	DUDDOCE		1/1	N 5			
	PURPOSE OF	A) Category (See Categories listed at the top of this s	chedule)	Description	outo	ide of Toyloo Com	ploto Cobodulo T
	EXPENDITURE	Office Overhead/Rental Expense		<u>—</u>		ide of Texas. Com , officeholder living	
				Check Order		, omcendaer nving	у схрепас
				Check Order			
L							
	Complete ONLY if direct	Candidate/Officeholder name	Office sough	nt		Office he	eld
	expenditure to benefit C/OI						
F	Date	Payee name					
	11/12/2024	Harmon, Shannon					
	Amount (\$)	, ,,	e; Zip Code	e			
	\$2,500.00	3827 Gaines Ct.					
1							
		Austin, TX 78735					
\vdash	DUDDOCE		1,1) Described			
	PURPOSE OF	a) Category (See Categories listed at the top of this s	chedule)	Description	outo	ide of Toyloo Com	ploto Cobodulo T
l	EXPENDITURE	Salaries/Wages/Contract Labor		<u></u>		ide of Texas. Com , officeholder living	
l				ш	, 1	, onicendider living	j experise
				Staff Bonus			
L							
1	Complete ONLY if direct	Candidate/Officeholder name	Office sough	nt		Office he	eld
	expenditure to benefit C/OI						
Г							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services The Instruction (Vages	/Contract Labor		OTHER (enter	a category not listed at	oove)
1	Total pages Cabadula F1:	12	EII ED NIAME						12	Filor ID	(Ethics Commiss	sion Filore)
_	Total pages Schedule F1:								3	Filer ID	(Ethics Commiss	sion Fileis)
	Sch: 12/35 Rpt:		Perry, Char	les L. (The Ho	norable)					00066066		
4	Date	5	Payee name									
	09/17/2024		Heritage Ho	use								
6	Amount (\$)	-	Payee addres		State	; Zip Co	do					
ľ	` '	'			State	, Zip Cu	ue					
	\$1,000.00		3302 67th S	street								
			Lubbock, TX	X 79413								
8	PURPOSE	(a)	Category (c.	ee Categories listed a	t the ten of this eah	adula)	(b)	Description				
ľ	OF	(")	Advertising		t the top of this sch	leaule)	()		outsi	ide of Texas. Co	mplete Schedule T.	
	EXPENDITURE		Advertising	Lxperise						, officeholder livir	•	
								Sponsorship				
9	Complete ONLY if direct		`andidate/Offi	ceholder name		Office sou	aht			Office h	neld	
ľ	expenditure to benefit C/OI		Sandidate/On	ceriolaei riairie		Jilice 30u	giit			Office i	iciu	
	Date		Payee name									
	07/19/2024		High Point \	/illage								
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$1,000.00		6223 Count	y Road 6300		·						
	Ψ1,000.00		ozzo odani	y riodd occo								
			Lubbock, TX	X 79416								
	PURPOSE	(a)	Category (Se	ee Categories listed a	t the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense				=			mplete Schedule T.	
	EXI ENDITORE							ш	ı, TX	, officeholder livir	ng expense	
								Sponsorship				
	Complete ONLY if direct		Candidate/Offi	ceholder name	(Office sou	ght			Office h	neld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	07/10/2024		-	hamber of Co	mmerce							
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de					
	\$103.00		110 Ave. H									
			Levelland, 7	X 79336								
	PURPOSE	(a)	Category /a	ee Categories listed a	t the ten of the	adula)	(h)	Description				
	OF	(۳)		head/Rental E		ledule)	(~)		outsi	ide of Texas. Co	mplete Schedule T.	
	EXPENDITURE		Office Over	neau/Nemai L	хрепзе			ш		, officeholder livir	•	
								Chamber Due	es			
\vdash	Complete ONLY if direct		Candidate/Offic	ceholder name	(Office sou	aht			Office h	neld	
	expenditure to benefit C/OI		Januluale/OIII	conduct name		Jillog 300	giit			Onice	iciu	
	•											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	07/25/2024	Lubbock Area Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,500.00	P.O. Box 6315
		Lubbock, TX 79493
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sponsorship
		Sponsoromp
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	
	Date	Payee name
	12/20/2024	Lubbock Challenger Little League
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 53695
	Ψ200.00	1 0 Dox 00000
		Lubbock, TX 79453
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Sponsorship
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/02/2024	Lubbock County Farm Bureau
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	10615 Quaker Ave.
		Lubbock, TX 79424
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Membership Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	09/03/2024	Lubbock County Republican Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1001 Main Street, Ste 208
		Lubbock, TX 79401
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sponsorship
		Species in p
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	09/17/2024	Lubbock County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	1001 Main Street, Ste 208
	,	
		Lubbock, TX 79401
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Membership Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
	Date	Payee name
	07/01/2024	Lubbock SeniorLink
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	3413 61st Street
	7.20.00	
		Lubbock, TX 79413
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Advertisement
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	parameter administration of the	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenoider/Politic	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4 Date	5 Payee name
08/01/2024	Mayer Museum
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	2501 W Ave N
	San Angelo, TX 76905
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	WTLS
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	PH Total Control of the Control of t
Date	Payee name
09/17/2024	McCormick Strategies Inc
Amount (\$)	Payee address; City; State; Zip Code
\$6,000.00	2013 Bluebonnett Lane #2
	Austin, TX 78704
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor
EXPENDITORE	Check if Austin, TX, officeholder living expense
	Campaign Contract Labor
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
Date	Davis rema
07/01/2024	Payee name NAACP of Lubbock
Amount (\$)	Payee address; City; State; Zip Code
\$600.00	PO Box 1903
φοσο.σσ	1 C BOX 1303
	Lubbock, TX 79408
PURPOSE	In .
OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Sponsorship
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiantile to beliefft C/O	, , , , , , , , , , , , , , , , , , ,

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
_	Sch: 16/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	08/01/2024	O'Keefe Media Group
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	PO Box 717
		Westwood , NJ 07675
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Donation
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/12/2024	Parks, Andrew (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	665 N Bagdad
		Apt #5107
		Leander, TX 78641
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Staff Bonus
		3.5.0
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Data	
	Date 09/25/2024	Payee name Project Destiny
		Project Destiny
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	PO Box 64268
		Lubbock, TX 79464
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Contributions/Contributions/Donations Made By Contributions/C
		Candidate/Officeholder/Political Committee
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	09/17/2024	Quannah Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.00	220 S Main Street
		Quannah, TX 79252
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Chamber Dues
		Chamber Bues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Dougo nama
		Payee name
	08/23/2024	Ram Club
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	ASU Station #11023
		San Angelo, TX 76907
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sponsorship
		- Ομοτισοίστημο - Επιστρομοίστημο - Επιστρομο - Επιστρομοίστημο - Επιστρομο -
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Davies same
	Date 12/02/2024	Payee name
		Ranching Heritage Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	3121 4th Street
		Lubbock, TX 79409
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Donation
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how	o complete this forn	, , , , , , , , , , , , , , , , , , , ,	
1 Total pages Schedule F1:	·		3 Filer ID (Ethics Commission Filer	rs)
Sch: 18/35 Rpt:	Perry, Charles L. (The Honorable)		00066066	,
4 Date	5 Payee name		·	
11/14/2024	SPAW Senate Account			
6 Amount (\$)	7 Payee address; City; State; Zip	Code		
\$61.00	Room 2E.22 - Capitol Bldg			
	Austin, TX 78701			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	on	
OF EXPENDITURE	Food/Beverage Expense		travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense	
		Meals	Austin, 17, unicerolder hving expense	
9 Complete ONLY if direct	Candidate/Officeholder name Office	sought	Office held	
expenditure to benefit C/O		3		
Date	Payee name			
11/21/2024	SPAW Senate Account			
Amount (\$)	Payee address; City; State; Zip	Code		
\$200.00	Room 2E.22 - Capitol Bldg	Couc		
Ψ200.00	1.00m 22.22 Supro Blug			
	Austin, TX 78701			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descriptio	on	
OF EXPENDITURE	Gift/Awards/Memorials Expense	Check if	travel outside of Texas. Complete Schedule T.	
LXI LINDITORE			Austin, TX, officeholder living expense	
		Benevole	ence Giit	
Complete ONLY if direct	Candidate/Officeholder name Office	sought	Office held	
expenditure to benefit C/O		Sought	Office field	
Date	Davida nama			
08/01/2024	Payee name Safari Club International			
		Codo		
Amount (\$) \$650.00	Payee address; City; State; Zip PO Box 3223	Code		
Ψ030.00	1 0 50% 3223			
	Lubbock, TX 79452			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Descriptio	on	
OF	Advertising Expense		travel outside of Texas. Complete Schedule T.	
EXPENDITURE			Austin, TX, officeholder living expense	
		Sponsors	snip	
0 1 6			05.	
Complete <u>ONLY</u> if direct expenditure to benefit C/O		sought	Office held	
,				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)		
	Sch: 19/35 Rpt:	Perry, Charles L. (The Honorable)	00066066		
4	Date	5 Payee name	•		
	10/18/2024	San Angelo Chamber of Commerce			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$300.00	418 W. Ave B			
	l	San Angelo, TX 76903			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense	el outside of Texas. Complete Schedule T.		
	LXI LINDITORE	I — I —	tin, TX, officeholder living expense		
		Chamber D	ues		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
9	expenditure to benefit C/O		Office field		
_	Data				
	Date	Payee name			
	08/01/2024	Solewin, George (Mr.)			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$800.00	8092 Hangar Road			
		San Angelo, TX 76904			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Traver in District	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense		
	!	Pilot	IIII, 17, Ullicendider living expense		
	!				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/O	•			
H	Date	Payee name			
	08/23/2024	South Plains Sweethearts			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$1,000.00	14343 Santa Luma			
	Ψ±,000.00	14343 Santa Lama			
	!	Holoto TV 70022			
		Helotes, TX 78023			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if trave	el outside of Texas. Complete Schedule T.		
	EXPENDITURE	Advertising Expense	tin, TX, officeholder living expense		
	!	Sponsorship			
	!				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OF	н			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 20/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	08/01/2024	Southcrest Christian School
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	3801 South Loop 289
		Lubbock, TX 79423
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Sponsorship
		Gp3.1337.51.11p
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	12/20/2024	Sweetwater Chamber of Commerce
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	810 East Broadway Street
	Ψ30.00	010 East Bloadway Street
		Sweetwater, TX 79556
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Chamber Dues
		Chambel Dues
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	07/08/2024	TDCJ
	Amount (\$)	Payee address; City; State; Zip Code
	\$660.33	PO Box 13084
		Austin, TX 78711-3084
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gavels
		Gaveis
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	10/07/2024	TDCJ
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$660.33	PO Box 13084
		Austin, TX 78711-3084
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Gavels
		Gaveis
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
⊨	Data	
	Date	Payee name
L	07/01/2024	Tepper, Robin (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3105 Ranch Ave
		Wolfforth, TX 79382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Labor
		Campaign Labor
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
⊨	Date	
	Date	Payee name Tannar Dahin (Ma.)
	08/01/2024	Tepper, Robin (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3105 Ranch Ave
		Wolfforth, TX 79382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign Labor
		Campaign Labor
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		

SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 22/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	09/03/2024	Tepper, Robin (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3105 Ranch Ave
		Wolfforth, TX 79382
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Labor
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
		•
	Date	Payee name
	10/01/2024	Tepper, Robin (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3105 Ranch Ave
		Wolfforth, TX 79382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign Labor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	y
	Date	Payee name
	11/12/2024	Tepper, Robin (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	3105 Ranch Ave
		Wolfforth, TX 79382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Bonus
		Stall Bollas
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	12/02/2024	Tepper, Robin (Ms.)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3105 Ranch Ave
		Wolfforth, TX 79382
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign Labor
		Sampanga - Land
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/11/2024	Tepper, Robin (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.48	3105 Ranch Ave
		Wolfforth, TX 79382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Staff Retreat Expenses
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payso nama
	11/01/2024	Payee name Tepper, Robin (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	3105 Ranch Ave
	4000.00	
		Wolfforth, TX 79382
	PURPOSE	In.
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign Labor
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_	
	Sch: 24/35 Rpt:	Perry, Charles L. (The Honorable) 00066066		
4	Date	5 Payee name		
	08/01/2024	Texans for Medical Freedom		
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code PO Box 175272 Arlington, TX 76003		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	П	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship		
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held		
	Date	Payee name	Ī	
	11/14/2024	Texas Farm Bureua Friends of Agriculture		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$500.00	PO Box 2689		
		Waco, TX 76702		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		
	Date	Payee name		
	10/24/2024	Texas Home School Coalition		
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 10 Briercroft Office Park		
		Lubbock, TX 79412		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	10/07/2024	Texas House of Representatives
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$541.25	PO Box 2910
		Austin, TX 78768-2910
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Flags
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/21/2024	Texas Senate
	Amount (\$)	Payee address; City; State; Zip Code
	\$875.00	PO Box 12068
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Calendars
		Calcillais
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	U
	Date	Payee name
	08/23/2024	Texas Sheep & Goat Raisers Associaton
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	PO Box 2290
		San Angelo, TX 76902
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Membership Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica			Git/Awards/Memoriai Legal Services	s Expense	Salaries/M		e /Contract Labor		OTHER (enter a	strict a category not listed above)
	Credit Card Payment			The Instruction G	Guide explains l	how to co	mple	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 26/35 Rpt:		Perry, Charl	es L. (The Hor	norable)					00066066	
4	Date	5	Payee name								
	09/03/2024		Texas Tech	Law School Fo	oundation						
6	Amount (\$)	7	Payee addres	s; City;	State;	Zip Co	de				
	\$1,000.00		3311 18th S	treet							
			Lubbock, TX	79409							
8	PURPOSE	(a)	Category (co	e Categories listed at	the ten of this colo	adula)	(b)	Description			
ľ	OF			e Categories listed at s/Donations M		eauie)	(~)	_ `	outsi	de of Texas. Con	nplete Schedule T.
	EXPENDITURE			Officeholder/Po		ittee		Check if Austin	, TX,	officeholder living	g expense
								Donation			
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name	C	Office sou	ght			Office h	eld
	experientare to benefit 6/01										
	Date		Payee name								
	11/12/2024		Tubbs, Gear	nna (Miss)							
	Amount (\$)		Payee addres	s; City;	State;	Zip Co	de				
	\$2,500.00		10613 Toleo	lo Ave.							
			Lubbock, TX	79424							
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description			
	OF EXPENDITURE	ı		ges/Contract L		,		Check if travel	outsi	de of Texas. Con	nplete Schedule T.
	LXI LINDITORE							ш	, TX,	officeholder living	g expense
								Staff Bonus			
	Complete ONLY if direct	<u> </u>	Candidate/Offic	oholder name		Office sou	aht			Office h	ald
	expenditure to benefit C/O		Januluale/Onic	enoluei name	C	mice sou	gni			Office II	eiu
		1									
	Date	ı	Payee name	ana (Misa)							
	12/11/2024	\vdash	Tubbs, Gea								
	Amount (\$)	ı	Payee addres	•	State;	Zip Co	de				
	\$50.76		10613 Toleo	io Ave.							
			Lubbock, TX	79424							
	PURPOSE OF			e Categories listed at	the top of this sche	edule)	(b)	Description			
	EXPENDITURE		Event Exper	ise						officeholder living	nplete Schedule T.
								Staff Retreat			у олронос
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ght			Office h	eld
	expenditure to benefit C/O						-				
l											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	08/01/2024	Vernon Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$55.00	1614 Main St.
		Vernon, TX 76384
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Chamber Dues
		Shambol Bacc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	н
F	Date	Payee name
	07/19/2024	Wayland Baptist University
H	Amount (\$)	Payee address; City; State; Zip Code
	\$487.50	801 N. Quaker Avenue
		Lubbock, TX 79416
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Bollation
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	07/10/2024	West Texas Homebuilders Association
H	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	4223 85th Street
	Ψ000.00	4220 00th 0th 0th
		Lubbock, TX 79423
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Membership Dues
L	Complete CNUV'S	Constitute (Office helder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
┰	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 28/35 Rpt:	Perry, Charles L. (The Honorable)
4	Date	5 Payee name
	07/10/2024	Wichita County Republican Party
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1401 Lamar Street Wichita Falls, TX 76301
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/01/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.82	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Credit Card Processing Fees
		Credit Card Processing Fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/25/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$2.05	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to con	plete this form.
1 Total pages Schedule F1: Sch: 29/35 Rpt:	2 FILER NAME Perry, Charles L. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00066066
4 Date	· · ·	0000000
08/01/2024	5 Payee name WinRed	
6 Amount (\$) \$0.82 8 PURPOSE	7 Payee address; City; State; Zip Coc 1776 Wilson Blvd Suite 530 Arlington, VA 22209 (a) Category (See Categories listed at the top of this schedule)	b) Description
OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug H	ht Office held
Date 08/05/2024	Payee name WinRed	
Amount (\$) \$39.40	Payee address; City; State; Zip Coo 1776 Wilson Blvd Suite 530 Arlington, VA 22209	e
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held
Date 08/25/2024	Payee name WinRed	
Amount (\$) \$2.05	Payee address; City; State; Zip Coo 1776 Wilson Blvd Suite 530 Arlington, VA 22209	е
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ht Office held

SCHEDULE F1

The strength of the strength o

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 30/35 Rpt:	Perry, Charles L. (The Honorable)	00066066
4	Date	5 Payee name	
	09/01/2024	WinRed	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$0.82	1776 Wilson Blvd	
		Suite 530	
		Arlington, VA 22209	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)) Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Credit Card Processing Fees
			9.000
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
	expenditure to benefit C/O		
F	Date	Payee name	
	09/07/2024	WinRed	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.10	1776 Wilson Blvd	
		Suite 530	
		Arlington, VA 22209	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)) Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Credit Card Processing Fees
			Credit Card 1 100000mg 1 000
	Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
	expenditure to benefit C/O		
	Date	Payee name	
	09/25/2024	WinRed	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2.05	1776 Wilson Blvd	
		Suite 530	
		Arlington, VA 22209	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)) Description
	OF EXPENDITURE	Fees	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense Credit Card Processing Fees
			Cledit Card Frocessing Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought	t Office held
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 31/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	09/27/2024	WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$59.10	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	10/01/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.82	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/17/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$63.20	1776 Wilson Blvd
		Suite 530
		Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit Card Processing Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 32/35 Rpt:	Perry, Charles L. (The Honorable) 00066066
4	Date	5 Payee name
	10/25/2024	WinRed
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2.05	1776 Wilson Blvd
	!	Suite 530
	!	Arlington, VA 22209
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Credit Card Processing Fees
	!	Cleuit Calu Flocessing Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	
H	Date	Payee name
	10/30/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.70	1776 Wilson Blvd
	·· ·	Suite 530
	!	Arlington, VA 22209
_	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
	!	Credit Card Processing Fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<u> </u>
	Date	Payee name
	11/01/2024	WinRed
	Amount (\$)	Payee address; City; State; Zip Code
	\$0.82	1776 Wilson Blvd
	!	Suite 530
	!	Arlington, VA 22209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Credit Card Processing Fees
	!	Credit Card Processing Fees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 33/35 Rpt:	2 FILER NAME Perry, Charles L. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00066066
4 Date 11/13/2024	5 Payee name WinRed
6 Amount (\$) \$82.04	7 Payee address; City; State; Zip Code 1776 Wilson Blvd Suite 530 Arlington, VA 22209
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 11/19/2024	Payee name WinRed
Amount (\$) \$102.54	Payee address; City; State; Zip Code 1776 Wilson Blvd Suite 530 Arlington, VA 22209
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 11/21/2024	Payee name WinRed
Amount (\$) \$19.70	Payee address; City; State; Zip Code 1776 Wilson Blvd Suite 530 Arlington, VA 22209
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Sal		iges	/Contract Labor		OTHER (enter	a category not listed a	bove)
		_		The Instruction Gu	uide explains how	to com	iple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 34/35 Rpt:		Perry, Charl	es L. (The Hone	orable)					00066066		
4	Date	5	Payee name									
	11/25/2024		WinRed									
6	Amount (\$)	7	Payee addres	s; City;	State; Zi	p Cod	е					
	\$2.05		1776 Wilson	Blvd								
			Suite 530									
			Arlington, VA	A 22209								
8	PURPOSE	(a)	<u> </u>		as too of this ashadula	. 10	b)	Description				
	OF	``	Fees	e Categories listed at t	ne top of this scriedule	, [,		outsi	de of Texas. Co	mplete Schedule T.	
	EXPENDITURE		1 000					Check if Austin,				
								Credit Card F	roc	cessing Fe	es	
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office	e sougl	ht			Office I	neld	
	expenditure to benefit C/OI	Η										
	Date		Payee name									
	12/06/2024		WinRed									
	Amount (\$)		Payee addres	s; City;	State; Zi	p Cod	е					
	\$82.74		1776 Wilson	Blvd								
			Suite 530									
			Arlington, VA	A 22209								
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this schedule) (1	b)	Description				
	OF EXPENDITURE		Fees					=			mplete Schedule T.	
								_		officeholder livi		
								Credit Card P	100	cessing re	es	
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name	Office	e sougl	ht			Office I	neld.	
	expenditure to benefit C/OI		Januluale/Onic	enoluei name	Office	s sougi	111			Office	ieiu	
	Data	_										
	Date		Payee name	Chamil								
	11/12/2024		de Cordova,									
	Amount (\$)		Payee addres	•	State; Zi	p Cod	е					
	\$2,500.00		3109 Oak M	ountain Trail								
			San Angelo,	TX 76904								
	PURPOSE OF	(a)		e Categories listed at t) (1	b)	Description				
	EXPENDITURE		Salaries/Wa	ges/Contract La	abor			Check if travel of Check if Austin,			mplete Schedule T.	
								Staff Bonus	, I.A.,	officeriolder livi	ng expense	
								C.a.i Doilas				
\vdash	Complete ONLY if direct	L(Candidate/Offic	ceholder name	Office	e sougl	ht			Office I	neld	
	expenditure to benefit C/OI		Janaidato Onic	Jones Humo	Cilico	Jougi				Silioci		
\vdash												

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Political C Credit Card Payment			nmittee	Legal Services The Instruction	Guide explains		ages	/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 35/35 Rpt:	ı		es L. (The H	onorable)					00066066	,
4	Date	5	Payee name								
	12/11/2024		de Cordova	, Cheryl							
6	Amount (\$)	7	Payee address	ss; City;	State	; Zip Co	de				
	\$271.20		3109 Oak M	Iountain Trail							
			San Angelo	, TX 76904		i					
8	PURPOSE OF				at the top of this sch	hedule)	(b)	Description			
	EXPENDITURE		Event Exper	nse				—		de of Texas. Com officeholder living	
								Staff Retreat			expense
								Stall Netreat		periodo	
Ļ	Complete ONLY !! -!!	Ļ	Condidate /Off			Office	ab.			O#:!	ald.
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	ceholder name	(Office sou	gnı			Office he	eid
	Date		Payee name								
	09/06/2024		de Cordova	, Cheryl							
	Amount (\$)		Payee addres	ss; City;	State	; Zip Co	de				
	\$211.86		3109 Oak N	Iountain Trail							
			San Angelo	, TX 76904							
	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	hedule)	(b)	Description			
	OF EXPENDITURE		Office Overl	nead/Rental I	Expense					de of Texas. Com	
								_		officeholder living	
								Office Supplie	-S I	Reillibulsell	ient
	Complete ONLY if direct	<u> </u>	Candidata/Offi	ceholder name		Office sou	aht			Office he	old.
	expenditure to benefit C/OI		zandidate/Oni	cenoidei name	`	Office Sou	grit			Office fie	ะเน

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete th	is form.						
1 Total pages Schedule F4:						cs Commiss	sion Filers)			
Sch: 1/27 Rpt: 88/114	Perry, Charles L. (T	The Honorable)			00066066					
4 CREDIT CARD ISSUER		ncial institution nase	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$					
6 PAYMENT	(a) Amount Charged \$900.00	(b) Date of Charge 07/10/2024	(c) Date(s) 0 08/16/2024	Credit Card Issue 4	Paid					
	ψ300.00	01/10/2024								
7 PAYEE	(a) Payee name		(b) Payee ac		City,	State,	Zip Code			
	San Angelo Symph	ony	PO Box 59)22						
			San Angel	o, TX 76902						
8 PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)	Sponsorsh	nip						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	Office sought							
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid					
	\$12.00	07/17/2024	08/16/2024	4						
PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code			
	City of Austin Parki	na	301 W. Se	cond St.						
	City of Austin Farkii	ng	Austin, TX	78701						
PURPOSE OF	(a) Category		(b) Descripti							
EXPENDITURE	(See Categories listed at the top	of this schedule)	Parking							
X Political	Travel Out of District									
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 0 09/18/2024	Credit Card Issuer	Paid					
	\$160.43	07/23/2024	09/16/2024	4						
PAYEE	(a) Payee name	l	(b) Payee ac	ddress;	City,	State,	Zip Code			
			1212 S La		•		·			
	Maudie's Too									
			Austin, TX	78704						
PURPOSE OF	(a) Category	(4)	(b) Descripti	on						
EXPENDITURE 	(See Categories listed at the top Food/Beverage Exper	•	Meal							
X Political	X Political									
Non-Political	(c) Check if travel outside		Check if Austin, TX,	officeholder living exp	ense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held					
expenditure to benefit C/OH	<u> </u>									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	s form.	(,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commiss	sion Filers)
Sch: 2/27 Rpt: 89/114	Perry, Charles L. (T	he Honorable)			00066066		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$16.25	(b) Date of Charge 08/08/2024	(c) Date(s) C 09/18/2024	redit Card Issuer 1	Paid		
7 PAYEE	(a) Payee name City of Austin Parkii	ng	(b) Payee ac 301 W. Sec	cond St.	City,	State,	Zip Code
	() 5 .		Austin, TX				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Parking	on			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$278.22	(b) Date of Charge 08/10/2024	(c) Date(s) C 09/18/2024	redit Card Issuer 1	Paid		
PAYEE	(a) Payee name Constant Contact		(b) Payee ac 1601 Trape Waltham, N	elo Road	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Campaign	on			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	_	Office held		
PAYMENT	(a) Amount Charged \$140.68	(b) Date of Charge 08/10/2024	(c) Date(s) C 09/18/2024	redit Card Issuer I	Paid		
PAYEE	(a) Payee name Office Max		(b) Payee ac 6805 Slide Lubbock, T	Road	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supp				
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)
Sch: 3/27 Rpt: 90/114	Perry, Charles L. (T	The Honorable)		00066066		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$1,030.35	(b) Date of Charge 07/01/2024	(c) Date(s) Credit Card Issue 08/16/2024	er Paid		
7 PAYEE 8 PURPOSE OF	(a) Payee name Parkridge Pregnand (a) Category	cy Center	(b) Payee address; 5203 79th Street Suite A Lubbock, TX 79424 (b) Description	City,	State,	Zip Code
EXPENDITURE X Political	(See Categories listed at the top Advertising Expense	of this schedule)	Sponsorship			
Non-Political	(1)	of Texas. Complete Schedule T.		, officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH	() 4 () 4	L (1) D (1) (1)	1/20/1/20 1/20 1/20			
PAYMENT	(a) Amount Charged \$156.54	(b) Date of Charge 07/01/2024	(c) Date(s) Credit Card Issue 08/16/2024	er Pald		
PAYEE	(a) Payee name	•	(b) Payee address;	City,	State,	Zip Code
	HEB		2400 S. Congress Ave.			
			Austin, TX 78704			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supplies			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin TX	, officeholder living exp	ense	
Complete ONLY if direct	Candidate/Officeholder		e sought	Office held		
expenditure to benefit C/OH			-			
PAYMENT	(a) Amount Charged \$169.81	(b) Date of Charge 07/10/2024	(c) Date(s) Credit Card Issue 08/16/2024	er Paid		
PAYEE	(a) Payee name Hyde Park Bar & G	(a) Payee name Hyde Park Bar & Grill		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	·	(b) Description Meal			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		, officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)
Sch: 4/27 Rpt: 91/114	Perry, Charles L. (T	he Honorable)			00066066		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$302.20	(b) Date of Charge 07/29/2024	(c) Date(s 09/18/20) Credit Card Issuei 124	Paid		
7 PAYEE	(a) Payee name Dun Bar East Resta	aurant		address; Iliam Street elo, TX 76905	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Descri				
EXPENDITURE X Political	(See Categories listed at the top Food/Beverage Expe		Meal	puon			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$826.14	(b) Date of Charge 07/29/2024	(c) Date(s 09/18/20) Credit Card Issuei 124	Paid		
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
	Courtyard by Marrid	ot	2570 SW	/ Blvd.			
				elo, TX 76901			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descri	ption oms for Staff for I	Event		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	<u> </u>	e sought		Office held		
PAYMENT	(a) Amount Charged \$38.91	(b) Date of Charge 07/30/2024	(c) Date(s 09/18/20) Credit Card Issuei 124	[*] Paid		
PAYEE	(a) Payee name Texaco			address; Bryant Blvd. elo, TX 76903	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	of this schedule)	(b) Descri Fuel	ption			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Carididate/Officeriolder/Folitica	ű	ruction Guide explains how	•	THER (effici a category i	ioi iisteu ai	Jove)
1 Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 5/27 Rpt: 92/114	Perry, Charles L. (T	he Honorable)		00066066		,
4 CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$22.35	(b) Date of Charge 07/10/2024	(c) Date(s) Credit Card Issuer 08/16/2024	r Paid		
7 PAYEE	(a) Payee name Starbucks		(b) Payee address; 5110 98th Street Lubbock, TX 79424	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Coffee			
Non-Political	(1)	of Texas. Complete Schedule T.		officeholder living expen	se	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$90.22	(b) Date of Charge 07/13/2024	(c) Date(s) Credit Card Issuer	r Paid		
PAYEE	(a) Payee name Nestle		(b) Payee address; 1812 N Moore Street	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Rosslyn, VA 22209 (b) Description Office Supplies			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expen	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$12.26	(b) Date of Charge 07/11/2024	(c) Date(s) Credit Card Issue 08/16/2024	r Paid		
PAYEE	(a) Payee name Starbucks		(b) Payee address; 5110 98th Street Lubbock, TX 79424	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	,	(b) Description Coffee			
Non-Political	(*) —	of Texas. Complete Schedule T.	_	officeholder living expen	se	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.	2 (0 0	,,	,
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Et	hics Commiss	sion Filers)
Sch: 6/27 Rpt: 93/114	Perry, Charles L. (T	he Honorable)		00066066		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZ EXPENDITURES CHARGED TO A CRE CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is 08/16/2024	suer Paid		
	\$44.34	07/08/2024	00/10/2024			
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			4805 S Loop 289			
	Longhorn Steak		Suite 500			
			Lubbock, TX 79424			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top		Meal			
X Political	Food/Beverage Expe	nse				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living e	xnense	
9 Complete ONLY if direct	Candidate/Officeholder	· ·	e sought	Office held		
expenditure to benefit C/OH			-			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$278.22	07/10/2024	08/16/2024			
	Ψ210.22	0171072024				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			1601 Trapelo Road			
	Constant Contact		·			
			Waltham, MA 02451			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Campaign Email			
X Political	Office Overflead/Reff	iai Experise				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austir	n, TX, officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid		
	\$18.24	07/11/2024	08/16/2024			
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			23808 Resort Pkwy			
	JW Marriott San An	itonio Resort &				
			San Antonio, TX 7826	1		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Meal			
X Political	- Sea, Deterage Exper	·· · -				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living e	xpense	
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 7/27 Rpt: 94/114	Perry, Charles L. (T	he Honorable)		00066066		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$63.81	(b) Date of Charge 07/24/2024	(c) Date(s) Credit Card Issuer 09/18/2024	r Paid		
7 PAYEE	(a) Payee name Central Market		(b) Payee address; 4001 N. Lamar Blvd.	City,	State,	Zip Code
	(a) Oatawari		Austin, TX 78756			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supplies			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$25.81	(b) Date of Charge 07/28/2024	(c) Date(s) Credit Card Issuer 09/18/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Bucks Steak and B	ar B Que	103 SW Georgia Ave.			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		Sweetwater, TX 79556 (b) Description Meal			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$38.98	(b) Date of Charge 08/08/2024	(c) Date(s) Credit Card Issuer 09/18/2024	r Paid		
PAYEE	(a) Payee name Tarrytown Pharmac	Tarrytown Pharmacy Inc		City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Office Supplies			
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Öffice	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Candidate/Officeriolide//Folitica		ruction Guide explains how	-	THER (enter a category	not listeu ai	Jove)
1 Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics	s Commiss	sion Filers)
Sch: 8/27 Rpt: 95/114	Perry, Charles L. (T	he Honorable)		00066066		,
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$194.31	(b) Date of Charge 08/08/2024	(c) Date(s) Credit Card Issuel 09/18/2024	r Paid		
7 PAYEE	(a) Payee name Alamo Mueller Rest	aurant	(b) Payee address; 1911 Aldrich Street Suite 120 Austin, TX 78723	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meal			
Non-Political	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of Texas. Complete Schedule T.		officeholder living expe	nse	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH			1			
PAYMENT	(a) Amount Charged \$11.02	(b) Date of Charge 08/08/2024	(c) Date(s) Credit Card Issuer 09/18/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Whataburger		6414 82nd Street			
DUDDOCE OF	(a) Catagon		Lubbock, TX 79424			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Meal			
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$42.30	(b) Date of Charge 08/14/2024	(c) Date(s) Credit Card Issuel 09/18/2024	r Paid		
PAYEE	(a) Payee name Nestle		(b) Payee address; 1812 N Moore Street	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		Rosslyn, VA 22209 (b) Description Office Supplies			
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.		officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

Carididate/Officeriolder/Folitica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how	•	THER (enter a category	not listed at	Jove)
1 Total pages Schedule F4:		· · · · · · · · · · · · · · · · · · ·	·	3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 9/27 Rpt: 96/114	Perry, Charles L. (T	he Honorable)		00066066		,
4 CREDIT CARD ISSUER	Name of finar	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$1,501.70	(b) Date of Charge 09/04/2024	(c) Date(s) Credit Card Issue 10/18/2024	r Paid		
7 PAYEE	(a) Payee name Fed Ex Office		(b) Payee address; 4210 82nd Street Suite 214 Lubbock, TX 79424	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Postage			
Non-Political	(1)	of Texas. Complete Schedule T.		officeholder living exper	ise	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH PAYMENT	(a) Amount Charged \$8.31	(b) Date of Charge 09/10/2024	(c) Date(s) Credit Card Issue 09/10/2024	r Paid		
PAYEE	(a) Payee name Summer Moon		(b) Payee address; 3201 Bee Caves Road Suite 163 Austin, TX 78746	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Coffee			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	ise	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$167.79	(b) Date of Charge 07/18/2024	(c) Date(s) Credit Card Issue 08/16/2024	r Paid		
PAYEE	(a) Payee name King Florist of Austi	n	(b) Payee address; 1806 W Koenig Lane Austin, TX 78756	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	s Expense	(b) Description Flowers			
Non-Political	(*) –	of Texas. Complete Schedule T.	<u> </u>	officeholder living exper	ise	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
I						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Sch: 10/27 Rpt:	Perry, Charles L. (1	he Honorable)		00066066	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6 PAYMENT	(a) Amount Charged \$66.22	(b) Date of Charge 07/30/2024	(c) Date(s) Credit Card Issue 09/18/2024	Paid	
7 PAYEE	(a) Payee name Chevron		(b) Payee address; 3251 N Bryant Blvd. San Angelo, TX 76903	City, State, Zip Code	
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Fuel				
Non-Political	(c) Check if travel outside	eck if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought			Office held	
PAYMENT	(a) Amount Charged \$311.25	(b) Date of Charge 07/31/2024	(c) Date(s) Credit Card Issue 09/18/2024	er Paid	
PAYEE	(a) Payee name National Car Rental		(b) Payee address; 3819 Presidential Blvd Austin, TX 78719	City, State, Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top Travel Out of District		(b) Description Car Rental		
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held	
PAYMENT	(a) Amount Charged \$68.63	(b) Date of Charge 07/30/2024	(c) Date(s) Credit Card Issue 09/18/2024	er Paid	
PAYEE	(a) Payee name Stripes		(b) Payee address; 701 US-87 Brady, TX 76825	City, State, Zip Code	
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel In District	, 	(b) Description Fuel		
Non-Political	`	of Texas. Complete Schedule T.	<u> </u>	, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete thi	s form.		,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 11/27 Rpt:	Perry, Charles L. (T	he Honorable)			00066066		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	F UNITEMIZED TURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$9.05	(b) Date of Charge 08/06/2024	(c) Date(s) C 09/18/2024	redit Card Issuer 1	Paid		
7 PAYEE	(a) Payee name National Car Rental	l		dential Blvd	City,	State,	Zip Code
	(a) Oatawari		Austin, TX				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Tolls	on			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$174.38	(b) Date of Charge 08/20/2024	(c) Date(s) C 10/18/2024	redit Card Issuer 1	Paid		
PAYEE	(a) Payee name HEB		(b) Payee ad 2400 S. Co Austin, TX	ngress Ave.	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supp	on			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	·	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged \$57.53	(b) Date of Charge 08/20/2024	(c) Date(s) C 10/18/2024	redit Card Issuer ‡	Paid		
PAYEE	(a) Payee name TacoDeli		(b) Payee ad 1817 S Lar Austin, TX	mar Blvd	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	*	(b) Description	on			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

Candidate/Officeriolder/Folitica	· ·	uction Guide explains how	•	THEN (enter a category not in	isted above)	
1 Total pages Schedule F4:		<u> </u>	<u> </u>	3 Filer ID (Ethics Co	mmission Filers)	
Sch: 12/27 Rpt:	Perry, Charles L. (Tl	he Honorable)		00066066	•	
4 CREDIT CARD ISSUER	Name of finan see pro	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer 10/18/2024	Paid		
	\$90.45	08/21/2024				
7 PAYEE	(a) Payee name Hyatt Regency		(b) Payee address; 575 Hyatt Lost Pines Rd	City, St	ate, Zip Code	
			Cedar Creek, TX 78612			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description			
l <u> </u>	Food/Beverage Expen		Meal at Hotel			
X Political			<u> </u>			
Non-Political	(*) L	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Onice	e sought	Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Paid		
FATIVILIVI			10/18/2024	raiu		
	\$259.67	09/11/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code	
			345 Park Avenue	•	•	
	Adobe					
			San Jose, CA 95110-2704	4		
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of Office Overhead/Rental		Software Subscription			
X Political	Ollido Ovorridadir torrid	ai Experioc				
Non-Political	(c) Check if travel outside o	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH			14 4 11 - 11			
PAYMENT	(a) Amount Charged \$58.45	08/06/2024	(c) Date(s) Credit Card Issuer 09/18/2024	· Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, St	ate, Zip Code	
			4827 E Cesar Chavez St.	3,	, p	
	Sawyer and Co					
			Austin, TX 78702			
PURPOSE OF	(a) Category (See Categories listed at the top of	of this echodula)	(b) Description			
EXPENDITURE	Food/Beverage Expen	•	Meal			
X Political	J , , ,					
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.	<u> </u>	officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH	<u> </u>					
I						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 13/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$40.54	(b) Date of Charge 08/05/2024	(c) Date(s) Credit Card Issuer 09/18/2024	r Paid		
7 PAYEE	(a) Payee name Gators Bayou		(b) Payee address; 5217 98th Street	City,	State,	Zip Code
	(a) Oatawari		Lubbock, TX 79424			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Meal			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$6.84	(b) Date of Charge 09/10/2024	(c) Date(s) Credit Card Issuer 10/18/2024	r Paid		
PAYEE	Summer Moon		(b) Payee address; 3201 Bee Caves Road Suite 163 Austin, TX 78746	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper		(b) Description Coffee			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$109.95	(b) Date of Charge 09/13/2024	(c) Date(s) Credit Card Issuel 10/18/2024	r Paid		
PAYEE	(a) Payee name Nestle		(b) Payee address; 1812 N Moore Street Rosslyn, VA 22209	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Office Supplies			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		sion Filers)	
l	Sch: 14/27 Rpt:	Perry, Charles L. (T	The Honorable)			00066066			
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$28.97	(b) Date of Charge 08/22/2024	(c) Date(s) C 10/18/2024	Credit Card Issuer 4	r Paid			
7	PAYEE	(a) Payee name Office Max		(b) Payee at 6805 Slide	Road	City,	State,	Zip Code	
١	DUDDOCE OF	(a) Category		Lubbock, T (b) Description					
8	PURPOSE OF EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Office Sup					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9	Complete ONLY if direct	rect Candidate/Officeholder name Office sought				Office held			
E	expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$121.54	(b) Date of Charge 08/26/2024	(c) Date(s) C 10/18/2024	Credit Card Issuer 4	r Paid			
	PAYEE	(a) Payee name	•	(b) Payee ac	ddress;	City,	State,	Zip Code	
		1 ' ' '		5405 Slide					
L	DUDDOS 05	(a) Cataman		Lubbock, T					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe	·	(b) Description	on				
	Non-Political	(a) Charle if the real autoids	of Towns Committee Colorabyle T		7 Observation TV	-#			
┝		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
e	Complete ONLY if direct expenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$278.22	(b) Date of Charge 09/10/2024	(c) Date(s) C 10/18/2024	Credit Card Issuei 4	r Paid			
	PAYEE	(a) Payee name		(b) Payee ac	ddress;	City,	State,	Zip Code	
		Constant Contact		1601 Trape					
L				Waltham, N					
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Description Campaign					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		7 Check if Austin TV	officeholder living exp	ense		
E	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	<u> </u>	e sought	J Shook ii Addilli, TA,	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

Candidate/Onicentidet/Fullica	· · · · · · · · · · · · · · · · · · ·	ruction Guide explains how	-	THEN (enter a category	not listed at	ove)
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	sion Filers)
Sch: 15/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$259.58	(b) Date of Charge 09/21/2024	(c) Date(s) Credit Card Issue 11/17/2024	r Paid		
7 PAYEE	(a) Payee name Mardel's		(b) Payee address; 7020 Quaker Ave. Lubbock, TX 79424	City,	State,	Zip Code
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE X Political	(See Categories listed at the top Gift/Awards/Memorial		Devotionals			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			officeholder living expe	nse	
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$1.00	(b) Date of Charge 09/27/2024	(c) Date(s) Credit Card Issue 11/17/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	City of Austin Parking		301 W. Second St.			
			Austin, TX 78701			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Parking			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		
PAYMENT	(a) Amount Charged \$161.29	(b) Date of Charge 09/29/2024	(c) Date(s) Credit Card Issue 11/17/2024	r Paid		
PAYEE	(a) Payee name HEB	1	(b) Payee address; 2400 S. Congress Ave. Austin, TX 78704	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supplies			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Com	mission Filers)
Sch: 16/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066	
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$	
6 PAYMENT	(a) Amount Charged \$113.66	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer 11/17/2024	Paid	
7 PAYEE	(a) Payee name King Florist of Austi	in	(b) Payee address; 1806 W Koenig Lane	City, Stat	e, Zip Code
8 PURPOSE OF	(a) Category		Austin, TX 78756 (b) Description		
EXPENDITURE X Political	(See Categories listed at the top Gift/Awards/Memorial		Flowers		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held	
PAYMENT	(a) Amount Charged \$70.85	(b) Date of Charge 10/01/2024	(c) Date(s) Credit Card Issuer 11/17/2024	Paid	
PAYEE	Galaxy Cafe		(b) Payee address; 8127 Mesa Drive Suite 100 Austin, TX 78759	City, Stat	e, Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Meal		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held	
PAYMENT	(a) Amount Charged \$278.22	(b) Date of Charge 10/10/2024	(c) Date(s) Credit Card Issuer 11/17/2024	Paid	
PAYEE	(a) Payee name Constant Contact		(b) Payee address; 1601 Trapelo Road Waltham, MA 02451	City, Stat	e, Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Campaign Email		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held	

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************	,	,
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 17/27 Rpt:	Perry, Charles L. (T	he Honorable)			00066066		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$67.37	(b) Date of Charge 10/10/2024	(c) Date(s)) Credit Card Issuei 124	r Paid		
7 PAYEE	(a) Payee name Overton Hotel			address; c Davis Lane , TX 79401	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Descrip				
X Political	Food/Beverage Expe	nse					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense	
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH	() 4	L (1) D (0)	1 () 5 ()		D : 1		
PAYMENT	(a) Amount Charged \$155.10	(b) Date of Charge 10/12/2024	(c) Date(s)) Credit Card Issuer 124	r Pald		
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
	Pappadeaux	6319 I-35 North		5 North			
			Austin, T				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descri	otion			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held		
PAYMENT	(a) Amount Charged \$94.01	(b) Date of Charge 10/15/2024	(c) Date(s)) Credit Card Issuer 124	r Paid		
PAYEE	(a) Payee name Nestle			address; Moore Street VA 22209	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip	otion			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instr	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 18/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$45.00	(b) Date of Charge 10/16/2024	(c) Date(s) Credit Card Issue 11/17/2024	er Paid		
7 PAYEE	(a) Payee name Four Seasons		(b) Payee address; 98 San Jacinto Blvd Austin, TX 78701	City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Valet Parking			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			, officeholder living expe	ense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$118.10	(b) Date of Charge 10/20/2024	(c) Date(s) Credit Card Issue 11/17/2024	er Paid		
PAYEE	Pappadeaux		(b) Payee address; 6319 I-35 North Austin, TX 78752	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Exper	*	(b) Description Meal			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$154.31	(b) Date of Charge 10/17/2024	(c) Date(s) Credit Card Issue 11/17/2024	er Paid		
PAYEE	Sympathy Floral Store		(b) Payee address; 230 W Monroe Street Suite 400 Chicago, IL 60606	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorials	•	(b) Description Flowers			
Non-Political	<u> </u>	of Texas. Complete Schedule T.		, officeholder living expe	ense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica				THER (enter a category	not listed at	oove)
		ruction Guide explains how	to complete this form.	I		
1 Total pages Schedule F4:				1	3 Filer ID (Ethics Commission Filers)	
Sch: 19/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066		
4 CREDIT CARD	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED	6		
ISSUER	see pr	evious	EXPENDITURES CHARGED TO A CREDIT	\$		
			CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
	\$4,075.49	10/23/2024	12/17/2024			
	, ,					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
			575 Hyatt Lost Pines Rd			
	Hyatt Regency					
			Cedar Creek, TX 78612			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE		(See Categories listed at the top of this schedule) Event Expense Staff Ret				
X Political	Event Expense					
Non-Political	(c) Check if travel outside	C) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			nso	
9 Complete ONLY if direct	Candidate/Officeholder		e sought	Office held	1130	
expenditure to benefit C/OH	Cararata, Cinicoriolaci	Tiamo Omo	o oodgin.	Omoc noid		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
			12/17/2024	. r ala		
	\$197.54	10/24/2024				
PAYEE	(a) Dayoo nama		(b) Dayon address:	City	Ctoto	Zip Code
TAILL	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	HEB		2400 S. Congress Ave.			
			Austin, TX 78704			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Office Supplies			
X Political	Office Overhead/Rent	al Expense				
Non-Political	(a) Doba all if the containts	et Tours - Committee Coloradule T	Observative TV	eff - ala alalan linda an anna		
_	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	marine Office	e sought	Office field		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Daid		
FATIVILINI			12/17/2024	raid		
	\$2,093.86	10/24/2024				
PAYEE	(a) Davida nama		(b) Davos address:	City	Ctot-	7in Codo
FAILL	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Southwest Airlines		PO Box 36647-1CR			
			Dellas TV 75225			
PURPOSE OF	(a) Category		Dallas, TX 75235 (b) Description			
EXPENDITURE	(See Categories listed at the top	of this schedule)	Staff Retreat			
X Political	Event Expense		Stan Notical			
I =						
Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		officeholder living expe	nse	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
expenditure to benefit C/OH						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 20/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$73.48	(b) Date of Charge 10/24/2024	(c) Date(s) Credit Card Issuel 12/17/2024	r Paid			
7 PAYEE	(a) Payee name Home Depot			3600 S I-35 Frontage Road			
	() 5 :		Austin, TX 78704				
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	· ·	(b) Description Office Expense				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	r Daid			
TATMENT	\$69.00	11/01/2024	12/17/2024	T alu			
PAYEE	(a) Payee name		(b) Payee address;	City, Sta	ate, Zip Code		
			PO Box 94014				
			Palatine, IL 60094				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Annual Credit Card Membership Fee				
Non-Political		of Towns Organizate Oak adula T	Observing TV	ett ala alda ett da esta esta esta esta esta esta esta est			
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expense Office held			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	Tiarrie Office	e sought	Office field			
PAYMENT	(a) Amount Charged \$182.00	(b) Date of Charge 11/05/2024	(c) Date(s) Credit Card Issuer 12/17/2024	r Paid			
PAYEE	(a) Payee name USPS		(b) Payee address; Singer Station 4901 S Loop 289 Lubbock, TX 79464	City, Sta	ate, Zip Code		
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Annual PO Box Rental				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense	<u> </u>		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 21/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$285.54	(b) Date of Charge 11/05/2024	(c) Date(s) Credit Card Issuer 12/17/2024	Paid		
7 PAYEE	(a) Payee name Mardel's		(b) Payee address; 7020 Quaker Ave.	City,	State,	Zip Code
	(a) Oatawari		Lubbock, TX 79424			
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Gift/Awards/Memorial	,	(b) Description Devotionals			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Y if direct Candidate/Officeholder name Office sought			Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$170.46	(b) Date of Charge 11/09/2024	(c) Date(s) Credit Card Issuer 12/17/2024	Paid		
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code
	Zoom		55 Almaden Blvd. 6th Floor San Jose, CA 95113			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Annual Software Subscrip	tion		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$278.22	(b) Date of Charge 11/10/2024	(c) Date(s) Credit Card Issuer 12/17/2024	Paid		
PAYEE	(a) Payee name Constant Contact		(b) Payee address; 1601 Trapelo Road Waltham, MA 02451	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	,	(b) Description Campaign Email			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense

	Candidate/Officeriolder/Folitica	· ·	ruction Guide explains how	•	TIER (enter a category	not iisteu a	bove)
1	Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)		
	Sch: 22/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066		,
4	CREDIT CARD ISSUER	Name of final	ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6	PAYMENT	(a) Amount Charged \$42.30	(b) Date of Charge 11/14/2024	(c) Date(s) Credit Card Issuer 12/17/2024	Paid		
7	PAYEE	(a) Payee name (b) Payee address; 1812 N Moore Stre Rosslyn, VA 22209			City,	State,	Zip Code
8 PURPOSE OF EXPENDITURE X Political		(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Description Office Supplies			
	Non-Political		of Texas. Complete Schedule T.	<u> </u>	officeholder living exper	nse	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held		
е	expenditure to benefit C/OH	()	T (1) = 1 (5)	1()= () = ()			
	PAYMENT	(a) Amount Charged \$1,035.00	(b) Date of Charge 11/14/2024	(c) Date(s) Credit Card Issuer 12/17/2024	[*] Paid		
PAYEE		(a) Payee name Holiday Motor Coad	ch LLC	(b) Payee address; 910 US 62 Frontage Road Wolfforth, TX 79382	City,	State,	Zip Code
PURPOSE OF EXPENDITURE X Political		(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description Transportation Rental			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living exper	nse	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
	PAYMENT	(a) Amount Charged \$300.00	(b) Date of Charge 11/14/2024	(c) Date(s) Credit Card Issuer 12/17/2024	· Paid		
	PAYEE	(a) Payee name The West Table		(b) Payee address; 1204 Broadway Street Suite 103 Lubbock, TX 79401	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal				
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	<u> </u>	officeholder living exper	nse	
Complete ONLY if direct							
I							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Sch: 23/27 Rpt:	Perry, Charles L. (The Honorable)				00066066			
4	CREDIT CARD ISSUER	see previous		EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$329.75	(b) Date of Charge 12/03/2024	(c) Date(s) 0 12/31/2024	Credit Card Issuer 4	Paid			
7	PAYEE	Randall's Grocery Store			sition Blvd.	City,	State,	Zip Code	
8	PURPOSE OF EXPENDITURE X Political	RPOSE OF (a) Category (See Categories listed at the top of this schedule) Event Expense		Austin, TX (b) Descripti Staff Retre	on				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held			
	PAYMENT	(a) Amount Charged \$278.22	(b) Date of Charge 12/10/2024	(c) Date(s) 0 12/31/2024	Credit Card Issuer 4	Paid			
PAYEE		(a) Payee name Constant Contact		(b) Payee at 1601 Trape Waltham, I	elo Road	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at Office Overhead)			,	(b) Descripti Campaign	on				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Γ	Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	_	Office held			
	PAYMENT	(a) Amount Charged \$96.28	(b) Date of Charge 12/19/2024	(c) Date(s) 0 12/31/2024	Credit Card Issuer 4	Paid			
PAYEE		(a) Payee name Galaxy Cafe		(b) Payee address; 8127 Mesa Drive Suite 100 Austin, TX 78759		City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) X Political Food/Beverage Expense		(b) Descripti Meal	on					
L	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	otal pages Schedule F4: 2 FILER NAME					sion Filers)		
Sch: 24/27 Rpt:	Perry, Charles L. (T	he Honorable)		00066066				
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$				
6 PAYMENT	(a) Amount Charged \$57.29	(b) Date of Charge 08/07/2024	(c) Date(s) Credit Card Issuer 09/18/2024	r Paid				
7 PAYEE	E (a) Payee name 24 Diner			City,	State,	Zip Code		
	(a) Oatawari		Austin, TX 78703					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense			(b) Description Meal					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$210.90	(b) Date of Charge 11/15/2024	(c) Date(s) Credit Card Issuer 12/17/2024	r Paid				
PAYEE	(a) Payee name HEB		(b) Payee address; City, 2400 S. Congress Ave. Austin, TX 78704		State,	Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			(b) Description Office Supplies					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expe	ense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				
PAYMENT	(a) Amount Charged \$8.12	(b) Date of Charge 11/15/2024	(c) Date(s) Credit Card Issuel 12/17/2024	r Paid				
PAYEE	(a) Payee name Toast and Tee		(b) Payee address; 4341 PGA Pkwy Frisco, TX 75033	City,	State,	Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense			(b) Description Coffee					
Non-Political	_	officeholder living expe	ense					
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica			aries/Wages/Cor		THER (enter a categor	y not listed at	oove)		
		ruction Guide explains how	to complete t	nis torm.	1				
1 Total pages Schedule F4:		3 Filer ID (Ethics Commission Filers)							
Sch: 25/27 Rpt:	Perry, Charles L. (T	he Honorable)			00066066				
4 CREDIT CARD	ncial institution	5 TOTAL OF UNITEMIZED							
ISSUER	see pi	revious		DITURES ED TO A CREDIT	\$				
			CARD	LD TO A ONEDIT					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	· Paid				
	\$180.00	11/21/2024	12/31/2024						
	Ψ100.00	11/21/2024							
7 PAYEE	(a) Payee name		(b) Payee a	address:	City,	State,	Zip Code		
	(a) · ayee ··a···e		P.O. Box		0.137,	Otato,	p		
	Lubbock Area Repu	ublican	1 .0. box	0313					
			Lubbock	TV 70402					
8 PURPOSE OF	(a) Cotagon		Lubbock, TX 79493 (b) Description						
EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues and Subscriptions		Members						
l <u> </u>			Members	Tilp Dues					
X Political									
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if			Check if Austin, TX,	officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid				
	\$15.75	11/21/2024	12/31/202	24					
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State,	Zip Code		
	Starbucks		5110 98th	n Street					
			Lubbock,	TX 79424					
PURPOSE OF	(a) Category	(b) I		ition					
EXPENDITURE	(See Categories listed at the top		Meal						
X Political	Food/Beverage Expe	nse							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought		Office held				
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	· Paid				
	\$259.80		12/02/202						
	Φ259.00	12/02/2024							
PAYEE	(a) Payee name		(b) Payee a	address.	City,	State,	Zip Code		
.,	(a) Fayee name				City,	State,	Zip Code		
	Capitol Gift Shop		1300 N C	ongress					
	<u>'</u>		Austin T	v 70701					
PURPOSE OF	(a) Category		Austin, TX (b) Descrip						
EXPENDITURE	(See Categories listed at the top	of this schedule)	Gifts	NUOTI					
<u></u>	Gift/Awards/Memorial	s Expense	J Cinto						
X Political									
Non-Political	<u> </u>	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense			
Complete ONLY if direct Candidate/Officeholder name Office sought Office held									
expenditure to benefit C/OH									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	le F4: 2 FILER NAME			3 Filer ID (Ethic	3 Filer ID (Ethics Commission Filers)			
	Sch: 26/27 Rpt:	Perry, Charles L. (1			00066066				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZE DITURES GED TO A CREE	\$			
6	PAYMENT	(a) Amount Charged \$8,446.12	(b) Date of Charge 12/04/2024	(c) Date(s)) Credit Card Iss 24	uer Paid			
7	PAYEE	(a) Payee name Hyatt Regency			address; tt Lost Pines R reek, TX 78612		State,	Zip Code	
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Staff Retreat		(b) Descri	otion	-				
			Check if Austin,	TX, officeholder living expe	ense				
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
۲	·	(a) Amount Charged	(b) Data of Charge	(a) Data(a)	Credit Card Iss	uar Daid			
	PAYMENT	(a) Amount Charged \$93.18	(b) Date of Charge 12/05/2024	12/31/20		uei Paiu			
PAYEE		(a) Payee name Texas Chili Parlour		(b) Payee 1409 Lav Austin, T	aca Street	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Descrip					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin,	TX, officeholder living expe	ense		
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT) Credit Card Iss 24	uer Paid				
	PAYEE (a) Payee name Boarderie Cheese & Charcuterie		Building	sident Barack	City, Obama Highway 14	State,	Zip Code		
	PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Descri	_					
lacksquare	Non-Political	`	of Texas. Complete Schedule T.	o corrept	Check if Austin,	TX, officeholder living expe	ense		
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
ı									

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica		ices Sal ruction Guide explains how		THER (enter a category not listed	above)		
1 Total pages Schedule F4:		Tuction Guide explains now	to complete this form.	3 Filer ID (Ethics Commis	ecion Eilore)		
Sch: 27/27 Rpt:	Perry, Charles L. (T	00066066	ssion Filers)				
		ncial institution	5 TOTAL OF UNITEMIZED	10000000			
4 CREDIT CARD ISSUER			EXPENDITURES	\$			
	see pr	revious	CHARGED TO A CREDIT CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	 r Paid			
PATMENT			12/31/2024	raid			
	\$42.30	12/13/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	(a) i ayee name		1812 N Moore Street	Oity, State,	Zip Couc		
	Nestle		1012 N WOOTE Street				
			Rosslyn, VA 22209				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Office Supplies				
X Political	Office Overhead/Rent	iai Expense					
Non-Political	(c) Check if travel outside of	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	· ·	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$632.20	12/17/2024	12/31/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State,	Zip Code		
	Midtown Printing and Graphics		4605 W Loop 289	4605 W Loop 289			
	() -	Lubbock, TX 79414					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top)	of this schedule)	(b) Description				
l <u> </u>	Printing Expense	· · · · · · · · · · · · · · · · · · ·	Thank You Card Printing				
X Political			<u> </u>				
Non-Political		of Texas. Complete Schedule T.		officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offici	e sought	Office held			
expenditure to benefit C/OH							