CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl		1 Filer ID (Ethics Commis 00068026		2 Total pages file			
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE L	JSE ONLY		
OFFICEHOLDER NAME	The Honorable	Mary Ann G.			Date Received ELECTRONICA	ALLY FILED		
	NICKNAME	LAST		SUFFIX	··· 01/12/2025			
		Perez						
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked		
OFFICEHOLDER MAILING ADDRESS	5223 Sleepy Creek Dr.				Receipt #	Amount		
Change of Address	Houston, TX 77017							
	riousion, 17, 17017				Date Processed			
					Date Imaged			
5 CAMPAIGN	MS / MRS / MR	FIRST		MI				
TREASURER	Mr.	Daniel						
NAME								
	NICKNAME	LAST		SUFFIX				
		Perez		III				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	r / SUITE #; CITY;	; STA	TE; ZIP CODE		
TREASURER ADDRESS	5223 Sleepy Creek Dr.	ŕ						
(Residence or Business)	Houston, TX 77017							
	Tiousion, TX TTOIT							
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	XTENSION					
TREASURER PHONE	(713) 854-5489							
THONE								
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after can	npaign treasurer		
					appointment (offic			
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ch C/OH-FR)		
9 PERIOD	Month Day Year			Month Day	Year			
COVERED	07/01/2024	TH	ROUGH	12/31/202	<u>?</u> 4			
10 ELECTION	ELECTION DATE			ELECTION TYPE				
	Month Day Year	Pr	rimary	Runoff	Other			
	11/12/2024	XG	eneral	Special	_			
				☐ -h				
11 OFFICE	OFFICE HELD (if any)	l		12 OFFICE SOUGHT	(if known)			
	State Representative Dist	rict 144 Harris			tative District 144			
	GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 40

13 C / OH NAME	Perez, Mary Ann G. (The Honorable)		14 Filer ID 00068026	(Ethics Comr	mission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures may	cepted or political expenditu y have been made without t red to report this information	the candidate's or offic	eholder's kno	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL	COMMITTEE ADDRES	SS			
	SPECIFIC					
		COMMITTEE CAMPAI	GN TREASURER NAME			
		COMMITTEE CAMPAI	GN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			RIBUTIONS (OTHER THAI NTRIBUTIONS MADE ELEC		\$	0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR	GUARANTEES OF LOANS	5)	\$	77,679.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS						7,437.32
	4. TOTAL POLITIC	AL EXPENDITURES			\$	33,040.82
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE L	AST DAY OF THE	\$	211,703.48
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		UTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT		true	ear, or affirm, under penalty and correct and includes al er Title 15, Election Code.			
				able Mary Ann G. Pe		
			Signature of	Candidate or Officeho	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subso	cribed before me, by the s	aid	hand and seal of office	, this the		_ day
	cer administering		fficer administering	Title of office	er administerir	ng oath
	-		-			

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			C	JVER	3 of 40
I	ER NAN	ME ry Ann G. (The Honorable)	19 Filer ID 00068026	(Ethics C	Commission Filers)
		E SUBTOTALS SCHEDULE		SUF	BTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	77,679.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	33,040.82
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10	. 🗆	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🗆	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12	. 🗆	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIB	NS	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 1/16 Rpt: 4/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 12/14/2024	 Full name of contributor	Associatio	n	7	Amount of Contribution (\$)	\$1,000.00
		Chicago, IL 60631					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state P Aransas-Corpus Christi Pilots Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$500.00
		Corpus Christi, TX 78403-2767					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/28/2024	Full name of contributor out-of-state F Bailey, Shawn Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$250.00
		League City, TX 77573					
	Principal occu Banker	pation / Job title (See Instructions)		Employer (See Instructions AMOCO	i)		
	Date 09/23/2024	Full name of contributor out-of-state F Beer Alliance of Texas Political Action C Contributor address; City; State; Zip Code Austin, TX 78701	Committee)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/15/2024	Full name of contributor out-of-state P Beer Alliance of Texas Political Action C Contributor address; City; State; Zip Code Austin, TX 78701	Committee			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBU	IS 	SCHEDULE A1			
	The Instru	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 2/16 Rpt: 5/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 12/14/2024	 Full name of contributor out-of-state PA Centerpoint Energy PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77210					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor out-of-state PA Chevron Employees PAC Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	San Ramon, CA 94583 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 11/17/2024	Full name of contributor out-of-state PA Chevron Phillips Chemical State PAC Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$500.00
_	Principal occu	The Woodlands, TX 77380 pation / Job title (See Instructions)		Employer (See Instructions	 - s)		
	Date 10/21/2024	Full name of contributor X out-of-state PA Chubb Group Holdings Inc. PAC Contributor address; City; State; Zip Code Philadelphia, PA 19106	C (ID#: <u>C00</u>)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/15/2024	Full name of contributor X out-of-state PA Comcast Corporation PAC Contributor address; City; State; Zip Code Philadelphia, PA 19103	C (ID#: <u>COC</u>)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			1				

	MONET	ARY POLITICAL C	NS		SCHEDUI	LE A1	
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 3/16 Rpt: 6/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 11/01/2024	5 Full name of contributor [Constellation Energy PAC6 Contributor address; City; Sta	x out-of-state PAC (ID#: <u>CC</u> te; Zip Code	00793711)	7	Amount of Contribution (\$)	\$1,000.00
		Washington, DC 20001					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Date 07/01/2024	Full name of contributor [Dwairy, Gus and Basma Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$1,400.00
	Deinsinal assu	Pasadena, TX 77505		Franks von (Cook kastu et and	<u></u>		
		pation / Job title (See Instructions) st Way Oil Field		Employer (See Instructions Best Way Oil Field	5)		
	Date 12/14/2024	Full name of contributor [Eiland, Craig Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Eiland & Bonnin	5)		
	Date 11/07/2024	Full name of contributor Enterprise Holdings Contributor address; City; Sta St. Louis, MO 63105	x out-of-state PAC (ID#: <u>CC</u> te; Zip Code	00219642)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor Enterprise Products Contributor address; City; Sta Houston, TX 77002	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/16 Rpt: 7/40		
2	FILER NAME Perez, Mary	Ann G. (The Honorable)		3	Filer ID (Ethics Commission 00068026	on Filers)	
4	Date 12/14/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00	
_	Daine in all access	Dallas, TX 75201	O Faralassa (Caralassa tasta at				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date 10/11/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Houston, TX 77077 pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ HOMEPAC of Texas-Texas Assn of Builders Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Date 10/10/2024	Full name of contributor	00086633		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ Hillco PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$250.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>			
		•					

	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: 5/16 Rpt: 8/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)		3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 10/31/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Houston, TX 77092				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID#:_ Houston Police Retired Officers Assn PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77252-2288 pation / Job title (See Instructions)	Employer (See Instructions	:)		
		,	, ,, ,	_		
	Date 12/14/2024	Full name of contributor)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78750				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Incline 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	<u> </u>		
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ Independent Insurance Agents of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78768			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: 6/16 Rpt: 9/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)		3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 07/01/2024	 Full name of contributor out-of-state PAC (ID#:_ Jerry Garcia Campaign Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$150.00
_		Houston, TX 77075				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 07/01/2024	Full name of contributor out-of-state PAC (ID#:_ Khaleeq, Sami Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$650.00
	Principal occu	Houston, TX 77089 pation / Job title (See Instructions)	Employer (See Instructions)		
	Business Ov		Self	,		
	Date 11/20/2024	Full name of contributor out-of-state PAC (ID#:_ Kirby Corp PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Houstn, TX 77007				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/01/2024	Full name of contributor out-of-state PAC (ID#:_Lemmond, Byron Contributor address; City; State; Zip Code Katy, TX 78024			Amount of Contribution (\$)	\$5.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 07/02/2024	Full name of contributor out-of-state PAC (ID#:_ Lemmond, Byron Contributor address; City; State; Zip Code Katy, TX 78024			Amount of Contribution (\$)	\$5.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBU	TION	S		SCHEDUI	E A1
	The Instruc	etion Guide explains how to complete th	his forr	n.	1	Total pages Schedule A1: Sch: 7/16 Rpt: 10/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 08/02/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$5.00
		Katy, TX 78024					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 09/23/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$7.00
	Principal occu	Katy, TX 78024 pation / Job title (See Instructions)		Employer (See Instructions)		
	Retired						
	Date 10/21/2024	Full name of contributor	(ID#:)		Amount of Contribution (\$)	\$7.00
		Katy, TX 78024					
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC Linebarger Goggan Blair & Sampson, LLP Contributor address; City; State; Zip Code Austin, TX 78760)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/31/2024	Full name of contributor out-of-state PAC Lyondell Chemical Company PAC Contributor address; City; State; Zip Code Houston, TX 77010	(ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL (ONS	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/16 Rpt: 11/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 11/07/2024	5 Full name of contributor McGuire Woods6 Contributor address; City; St	x out-of-state PAC (ID#: C		7	Amount of Contribution (\$)	\$500.00
		Richmond, VA 21219					
8	Principal occu	pation / Job title (See Instructions	·)	9 Employer (See Instructions	5)		
	Date 11/01/2024	Full name of contributor NABIP Texas PAC Contributor address; City; Si	X out-of-state PAC (ID#: C	000283135)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Cranford, NJ 07016 pation / Job title (See Instructions	·)	Employer (See Instructions	 ;)		
	Date 12/02/2024	Full name of contributor NAIFA Texas IFAPAC Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 09/23/2024	Full name of contributor National Association of M Contributor address; City; Si Indianapolis, IN 46268	······································	anies PAC		Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/15/2024	Full name of contributor Oncor Texas State PAC Contributor address; City; St Dallas, TX 75202-1234	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUT	IS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 9/16 Rpt: 12/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 11/20/2024	 Full name of contributor out-of-state PAC (In PharmPac Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 77023					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (I Red Rock Texas PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Deinsinal	Austin, TX 78701		Frankrije (Contraction			
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/17/2024	Full name of contributor out-of-state PAC (I Rodriguez, James Contributor address; City; State; Zip Code	ID#:			Amount of Contribution (\$)	\$250.00
		Houston, TX 77062					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (I Sabine Pilot PAC Contributor address; City; State; Zip Code Port Arthur, TX 77640	ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/31/2024	Full name of contributor x out-of-state PAC (I Safelite Group Inc. PAC Contributor address; City; State; Zip Code Columbus, OH 43235	ID#: CO)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/16 Rpt: 13/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)		3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 12/09/2024	5 Full name of contributor out-of-state PAC (ID#:_ TALAPAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
0	Dringing oggu	Austin, TX 78759 pation / Job title (See Instructions)	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 TBA Bank PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$3,500.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/08/2024	TREPAC/Texas Association of Realtors PAC Contributor address; City; State; Zip Code				\$2,500.00
	Principal occu	Austin, TX 78768-2246 pation / Job title (See Instructions)	Employer (See Instructions)		
	Timolpai occa	pation / vos title (eee metactions)	Employer (Goo mondone)			
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ TXCPA PAC Contributor address; City; State; Zip Code Dallas, TX 75254			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/21/2024	Full name of contributor out-of-state PAC (ID#:_ TXTA Trick 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)		

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 11/16 Rpt: 14/40		
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4			7	Amount of Contribution (\$)	\$1,000.00		
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/14/2024	Full name of contributor Tameez, Mustafa Contributor address; City; Sta				Amount of Contribution (\$)	\$2,500.00
	Principal occu	Houston, TX 77057		Employer (See Instructions	·/		
Principal occupation / Job title (See Instructions) Managing Director Employer (See Instructions) Outreach Strategist, LLC							
	Date Full name of contributor out-of-state PAC (ID#:) 12/17/2024 Tamez, Adriana (Ms.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00		
		Houston, TX 77023					
	Principal occu Superintendo	pation / Job title (See Instructions) ent		Employer (See Instructions Tejano Center for Comm	•	nity Concerns	
	Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 Targas Resources Corp. Texas PAC Contributor address; City; State; Zip Code Houston, TX 77002			Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/02/2024 Texas AFL-CIO State Cope Fund Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<u> </u>				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 12/16 Rpt: 15/40		
2	FILER NAME Perez, Mary	Ann G. (The Honorable)		3	Filer ID (Ethics Commission 00068026	on Filers)	
4	Date 08/16/2024	Date 5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$2,500.00	
_		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/31/2024 Texas Building Branch AGC 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)			
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Cornerstore Credit Union League PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,000.00	
	Dringing oggu	Dallas, TX 75265	Employer (See Instructions				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 08/16/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Democratic Women Contributor address; City; State; Zip Code Austin, TX 78703)		Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dental Association PAC Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 13/16 Rpt: 16/40		
2	FILER NAME Perez, Mary	Ann G. (The Honorable)			3	Filer ID (Ethics Commission 00068026	on Filers)
4	Date 12/14/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
_	Deignaignal	Austin, TX 78703	- 10	Franks on (Cook bathwations			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAG Texas Lobby Group 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	5)		
	Date 12/10/2024	Full name of contributor out-of-state PAG Texas McDonald's Operations Association Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Athens, TX 75751					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/21/2024	Full name of contributor out-of-state PAG Texas Optometric PAC Contributor address; City; State; Zip Code Austin, TX 78705				Amount of Contribution (\$)	\$1,000.00
		Employer (See Instructions	<u> </u>				
	Date Full name of contributor out-of-state PAC (ID#:) 11/25/2024 Texas Sands PAC Contributor address; City; State; Zip Code Austin, TX 78701			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: 14/16 Rpt: 17/40		
2	FILER NAME Perez, Mary	Ann G. (The Honorable)		3	Filer ID (Ethics Commission 00068026	on Filers)	
4	Date 12/11/2024	Date 5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$)	\$1,000.00	
_		Austin, TX 78734					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))			
	Date Full name of contributor out-of-state PAC (ID#:) 12/02/2024 Texas State Teachers Association PAC Contributor address; City; State; Zip Code Austin, TX 78759			Amount of Contribution (\$)	\$500.00		
Principal occupation / Job title (See Instructions) Employer (See Instruction)			
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association 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				
		panon, cos uno (cos menusuone)	pie) 6. (666 illet dotte) 6	,			
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association 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)			
	Date Full name of contributor		000123612		Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1		
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 15/16 Rpt: 18/40	
2	FILER NAME Perez, Mary	Ann G. (The Honorable)		3	Filer ID (Ethics Commission 00068026	on Filers)
4			7	Amount of Contribution (\$)	\$1,000.00	
		Dallas, TX 75251				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ USAA Employee PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$750.00
		San Antonio, TX 78288		_		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date Full name of contributor X out-of-state PAC (ID#:C00010470 O9/16/2024 Union Pacific Corporation Fund for Effective Government Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,000.00	
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)	Employer (See Instructions	 ;)		
	Date Full name of contributor X out-of-state PAC (ID#: C00101766 12/14/2024 United Airlines, Inc. PAC Contributor address; City; State; Zip Code Chicago, IL 60606			Amount of Contribution (\$)	\$750.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date Full name of contributor out-of-state PAC (ID#:) 12/14/2024 University of Houston PAC Contributor address; City; State; Zip Code Houston, TX 77046			Amount of Contribution (\$)	\$2,500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
		•				

MONETARY POLITICAL CONTRIBUTIONS					SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 16/16 Rpt: 19/40		
2	FILER NAME			1	Filer ID (Ethics Commission	on Filers)
		Ann G. (The Honorable)			00068026	
4	Date 07/28/2024	 Full name of contributor out-of-state PAC (ID#: Valentin, Saul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$950.00
		Houston, TX 77098	1			
8	Principal occu Principal	upation / Job title (See Instructions)	9 Employer (See Instructions Self	ıs) 		
	Date 10/15/2024	Full name of contributor X out-of-state PAC (ID#:_Vistra Employee PAC	C00226548)		Amount of Contribution (\$)	\$1,000.00
		Contributor address; City; State; Zip Code				
	Principal occu	Irving, TX 75039-2479 upation / Job title (See Instructions)	Employer (See Instructions			
	r illicipai occi	apadon / 300 title (See instructions)	Employer (See instructions	13)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Winkler Public Relations Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
		Houston, TX 77273-3404				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	is)		

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		
-	Total pages Cabadula F1:		$\overline{}$
1	Total pages Schedule F1: Sch: 1/21 Rpt: 20/40	2 FILER NAME Perez, Mary Ann G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00068026	
4	Date	5 Payee name	
	11/01/2024	AMLI Apartments	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,000.00	421 E. 3rd Street	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	X Check if Austin, TX, officeholder living expense	
		Apartment Deposit	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	11/01/2024	AMLI Apartments	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$400.00	421 E. 3rd Street	
		Austin, TX 78701	
	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.	
		X Check if Austin, TX, officeholder living expense	
		Move in Fee	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	11/09/2024	AMLI Apartments	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,055.37	421 E. 3rd Street	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		X Check if Austin, TX, officeholder living expense	
		Partial Rent	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	п	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politic 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: 2/21 Rpt: 21/40	Perez, Mary Ann G. (The Honorable) 00068026
4 Date	5 Payee name
12/03/2024	AMLI Apartments
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,845.31	421 E. 3rd Street
	Austin, TX 78701
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. X Check if Austin, TX, officeholder living expense
	Rent
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Dayloo nama
07/15/2024	Payee name
	AT&T Mobility
Amount (\$)	Payee address; City; State; Zip Code
\$290.27	P O Box 650574
	Dallas, TX 75265
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
	Telephone
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
08/08/2024	AT&T Mobility
Amount (\$)	Payee address; City; State; Zip Code
\$352.64	P O Box 650574
	Dallas, TX 75265
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
	Check if Austin, TX, officeholder living expense
	Telephone
Ossessiata CNUVIII	
Complete <u>ONLY</u> 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
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 Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/21 Rpt: 22/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	09/12/2024	AT&T Mobility
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$290.34	P O Box 650574
		Dallas, TX 75265
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 Telephone
		relephone
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	10/15/2024	AT&T Mobility
_	Amount (\$)	Payee address; City; State; Zip Code
	\$290.34	P O Box 650574
	Ψ230.34	1 C Box 030314
		Dallas, TX 75265
	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 Telephone
		Totophichic
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	11/13/2024	AT&T Mobility
	Amount (\$)	Payee address; City; State; Zip Code
	\$290.44	P O Box 650574
		
		Dallas, TX 75265
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Telephone
		ι ειεμποπε
_	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 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: 4/21 Rpt: 23/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	12/15/2024	AT&T Mobility
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$331.69	P O Box 650574
		Dallas, TX 75265
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Telephone
		Γειεμποπε
_	Operation ONLY if allowed	Our distance (Office health as marries and Office health
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/05/2024	All My Sons Moving
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	500 E Ben White Blvd
		E-350
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Moving Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Deposit
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit of or	
	Date	Payee name
	11/13/2024	All My Sons Moving
	Amount (\$)	Payee address; City; State; Zip Code
	\$482.19	500 E Ben White Blvd
		E-350
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Moving into Apt Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Moving
	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 -

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: 5/21 Rpt: 24/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	09/23/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$324.73	410 Terry Ave. North
		Seattle, WA 98109
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
		Office Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/18/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$120.20	410 Terry Ave. North
		Seattle, WA 98109
	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
		Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/18/2024	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$147.21	410 Terry Ave. North
		Seattle, WA 98109
	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
		Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage

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		
_	Total manage Calculula E4.		<u> </u>
1	Total pages Schedule F1: Sch: 6/21 Rpt: 25/40	Perez, Mary Ann G. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068026
4	Date	5 Payee name	
	11/18/2024	Amazon	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$199.17	410 Terry Ave. North	
		Seattle, WA 98109	
		Sealie, WA 90109	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descri	
	EXPENDITURE	Chief overhead/Nerital Expense	k if travel outside of Texas. Complete Schedule T.
	-		k if Austin, TX, officeholder living expense
		Suppl	es
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	l	
_	Date	Payee name	
	11/18/2024	Amazon	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$191.54	410 Terry Ave. North	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	otion
	OF EXPENDITURE		k if travel outside of Texas. Complete Schedule T.
	LAI LIIDITORE		k if Austin, TX, officeholder living expense
		Suppl	es
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	ı	
	Date	Payee name	
	11/26/2024	Amazon	
\vdash			
	Amount (\$)	3 1	
	\$107.17	410 Terry Ave. North	
		Seattle, WA 98109	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	otion
	OF	· · · · · · · · · · · · · · · · · · ·	k if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		k if Austin, TX, officeholder living expense
		Suppl	es
	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 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		
_	Total manage Calculula E4.		
1	Total pages Schedule F1: Sch: 7/21 Rpt: 26/40	Perez, Mary Ann G. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00068026
4	Date	5 Payee name	'
	12/06/2024	Amazon	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$129.25	410 Terry Ave. North	
		Seattle, WA 98109	
		Seattle, WA 90109	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overfiedd/Nertial Experise	travel outside of Texas. Complete Schedule T.
	-	l —	Austin, TX, officeholder living expense
		Supplies	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
_	Date	Payee name	
	11/12/2024	American Legion Post 472	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$104.00	7599 Avenue C	
		Houston, TX 77012	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	n
	OF		travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Austin, TX, officeholder living expense
		Contribu	tion
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
H	Date	Payee name	
	09/18/2024	Antonelli's Cheese House	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$389.70	500 Park Boulevard	
		Austin, TX 78751	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	on .
	OF		travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Austin, TX, officeholder living expense
			er
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
L		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 8/21 Rpt: 27/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
L	09/05/2024	Capitol Gift Shop
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$118.86	1100 Congress Ave.
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	LAFENDITURE	Check if Austin, TX, officeholder living expense
		Constituent Gifts
L		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
L	12/09/2024	Capitol Gift Shop
	Amount (\$)	Payee address; City; State; Zip Code
	\$194.85	1100 Congress Ave.
		Austin, TX 78701
	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 Mayoral Gifts
		iviayorai Giits
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	U
L	Dete	
	Date	Payee name
	10/15/2024	Cassandra Hernandez for HD115
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	P O Box 1289
		Addison, TX 75001
	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
		Contribution
	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	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: 9/21 Rpt: 28/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	10/31/2024	Cedar Bayou Conference Center
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$420.00	15118 Farm to Market Rd 2354
		Baytown, TX 77523
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
		Staff Retreat
		Stan Northal
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OH	- · · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	09/09/2024	HDCC
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	1106 Lavaca St
		202
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Caucas Dues Caucas Dues Caucas Dues Caucas Dues
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/27/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$177.65	3111 Woodridge
		
		Houston, TX 77087
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/O	¬
ı		

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

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

1 Total pages Schedule F1: Sch: 10/21 Rpt: 29/40 Perez, Mary Ann G. (The Honorable) 4 Date 12/23/2024 Payee name Houston Livestock Show & Rodeo 6 Amount (\$) Payee address; City; State; Zip Code 3 NRG Park	Filers)
4 Date 12/23/2024 5 Payee name Houston Livestock Show & Rodeo 7 Payee address; City; State; Zip Code 3 NRG Park	
12/23/2024 Houston Livestock Show & Rodeo 6 Amount (\$)	
12/23/2024 Houston Livestock Show & Rodeo 6 Amount (\$)	
\$270.00 3 NRG Park	
Houston, TX 77054	
8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE Advertising Expense	
X Check if Austin, TX, officenoider living expense	
HLSR Event	
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	
<u> </u>	
Date Payee name	
08/16/2024 Intuit	
Amount (\$) Payee address; City; State; Zip Code	
\$601.88 2800 East Commerce Center Place	
Tucson, AZ 85706	
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 Quickbooks	
· · · · · · · · · · · · · · · · · · ·	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
·	
Date Payee name	
Date Payee name 10/04/2024 JW Marriott San Antonio	
Date Payee name 10/04/2024 JW Marriott San Antonio Amount (\$) Payee address; City; State; Zip Code	
Date Payee name 10/04/2024 JW Marriott San Antonio	
Date Payee name 10/04/2024 JW Marriott San Antonio Amount (\$) Payee address; City; State; Zip Code \$1,300.66 23808 Resort Parkway	
Date 10/04/2024 Amount (\$) Payee name JW Marriott San Antonio Payee address; City; State; Zip Code \$1,300.66 \$23808 Resort Parkway San Antonio, TX 78261	
Date 10/04/2024 JW Marriott San Antonio Amount (\$) Payee address; City; State; Zip Code \$1,300.66 \$1,300.66 San Antonio, TX 78261 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
Date 10/04/2024 JW Marriott San Antonio Amount (\$) Payee address; City; State; Zip Code \$1,300.66 \$1,300.66 San Antonio, TX 78261 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description	
Date 10/04/2024 Amount (\$) Payee address; City; State; Zip Code \$1,300.66 \$1,300.66 San Antonio, TX 78261 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) MALC Conference Payee name JW Marriott San Antonio State; Zip Code State; Zip Code (b) Description Check if travel outside of Texas. Complete Schedule T.	
Date 10/04/2024 Payee name JW Marriott San Antonio Amount (\$) Payee address; City; State; Zip Code \$1,300.66 \$1,300.66 San Antonio, TX 78261 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) MALC Conference MALC Conference Check if Austin, TX, officeholder living expense	
Date 10/04/2024 Amount (\$) San Antonio, TX 78261 PURPOSE OF EXPENDITURE PURPOSE OF Complete ONLY if direct Candidate/Officeholder name Payee name JW Marriott San Antonio State; Zip Code 23808 Resort Parkway San Antonio, TX 78261 (a) Category (See Categories listed at the top of this schedule) MALC Conference (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hotel Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
Date 10/04/2024 Payee name JW Marriott San Antonio Amount (\$) \$1,300.66 Payee address; City; State; Zip Code 23808 Resort Parkway San Antonio, TX 78261 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) MALC Conference (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hotel	
Date 10/04/2024 Amount (\$) San Antonio, TX 78261 PURPOSE OF EXPENDITURE PURPOSE OF Complete ONLY if direct Candidate/Officeholder name Payee name JW Marriott San Antonio State; Zip Code 23808 Resort Parkway San Antonio, TX 78261 (a) Category (See Categories listed at the top of this schedule) MALC Conference (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hotel Complete ONLY if direct 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 Commi 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	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 11/21 Rpt: 30/40	2 FILER NAME Perez, Mary Ann G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00068026
4	Date	5 Payee name
	10/16/2024	Kristian Caranza for Texas
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code P O Box 831436
	Ψ230.00	1 G BOX 301400
		San Antonio, TX 78283
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
		Contribution
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/16/2024	LaRessa for AISD
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	2025 E 7th Street
		Apt 215
		Austin, TX 78702
		To a second seco
	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
		Contribution
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/18/2024	Linda for Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	539 W. Commerce
		#4804
		Dallas, TX 75208
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LXI LINDITORL	Candidate/Officeholder/Political Committee
		Contribution
L		
	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) Event Expense

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: Sch: 12/21 Rpt: 31/40	2 FILER NAME Perez, Mary Ann G. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00068026
4	Date 08/26/2024	5 Payee name Maria Rita's
6	Amount (\$) \$122.24	7 Payee address; City; State; Zip Code 8445 Gulf Freeway Houston, TX 77017
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff Birthday Lunch
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 12/04/2024	Payee name Mexican American Legislative Caucus
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 202 West 13th Street
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Dues (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Dues
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 09/23/2024	Payee name Omni Hotel - Austin
	Amount (\$) \$560.28	Payee address; City; State; Zip Code 700 San Jacinto at 8th Street
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Hearing (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hotel
	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 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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 13/21 Rpt: 32/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	10/15/2024	Omni Hotel - Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$333.94	700 San Jacinto at 8th Street
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Transportation Hearing
		g
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	09/09/2024	Omni Hotel - Austin
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$568.02	700 San Jacinto at 8th Street
	Ψ000.02	Too dan dading at dan dadat
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Insurance Committee Hearing
		insurance commune rearing
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	12/03/2024	Progressive Insurance
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$146.93	6300 Wilson Mills Road
	Ф140.93	0300 Wilson Willis Road
		Mayfield Village, OH 44143
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Renter's Insurance Policy Check if travel outside of Texas. Complete Schedule T.
		X Check if Austin, TX, officeholder living expense
I		Renter's Insurance
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$ldsymbol{f eta}$		

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

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)
l	Sch: 14/21 Rpt: 33/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	07/01/2024	Public Storage Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$116.00	1213 W 6th Street
l		
l		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
ľ	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Austin Storage Unit
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experialture to beliefit C/OI	<u>'</u>
	Date	Payee name
	08/05/2024	Public Storage Austin
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$116.00	1213 W 6th Street
l		
		Austin, TX 78703
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Storage Unit
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊢	Dete	
	Date 09/03/2024	Payee name Public Storage Austin
┡		
l	Amount (\$) \$116.00	Payee address; City; State; Zip Code 1213 W 6th Street
l	\$110.00	1213 W but Street
l		A TV 70700
		Austin, TX 78703
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Austin Storage Unit
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
H		
ĺ		

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 (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 15/21 Rpt: 34/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	10/04/2024	Public Storage Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$116.00	1213 W 6th Street
		Austin, TX 78703
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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Austin Storage Unit
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/04/2024	Public Storage Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$116.00	1213 W 6th Street
		Austin, TX 78703
	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 Austin Storage Unit
		Austin Storage Offic
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date 12/04/2024	Payee name Public Storage Austin
		-
	Amount (\$)	Payee address; City; State; Zip Code
	\$116.00	1213 W 6th Street
		Austin, TX 78703
	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
		Austin Storage Unit
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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

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

Transportation Equipment & Related Expense Travel in District Travel Out of District

Solicitation/Fundraising Expense

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 16/21 Rpt: 35/40 Perez, Mary Ann G. (The Honorable) 00068026 4 Date Payee name 07/01/2024 **Public Storage** 6 Amount (\$) Payee address; State; Zip Code \$99.00 8430 Gulf Freeway Houston, TX 77017 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Houston Storage Unit Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/05/2024 **Public Storage** Amount (\$) Payee address; City; State; Zip Code \$99.00 8430 Gulf Freeway Houston, TX 77017 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Storage Unit in Houston Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/04/2024 **Public Storage** Amount (\$) Payee address: City: State; Zip Code \$99.00 8430 Gulf Freeway Houston, TX 77017 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Houston Storage Unit Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

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

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 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)

l	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)	_
l	Sch: 17/21 Rpt: 36/40	Perez, Mary Ann G. (The Honorable) 00068026	
4	Date	5 Payee name	_
	10/02/2024	Public Storage	
6	Amount (\$) \$99.00	7 Payee address; City; State; Zip Code 8430 Gulf Freeway	
L		Houston, TX 77017	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Houston Storage Unit	
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	11/04/2024	Public Storage	
	Amount (\$) \$99.00	Payee address; City; State; Zip Code 8430 Gulf Freeway	
		Houston, TX 77017	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Houston Storage Unit	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_
Г	Date	Payee name	
	10/08/2024	Royal Sonesta	
	Amount (\$) \$280.76	Payee address; City; State; Zip Code 2222 W South Loop S	
		Houston, TX 77027	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Firefighter's Red Hot Gala	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_

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/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: 18/21 Rpt: 37/40	Perez, Mary Ann G. (The Honorable) 00068026
4	Date	5 Payee name
	10/08/2024	Southwest Airlines
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$507.96	7910 Airport
		Houston, TX 77061
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Airfare to Fundraiser
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	09/11/2024	St. Augustine Catholic Church
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	5560 Laurel Creek
		Houston, TX 77017
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder (Political Committee) Check if Austin, TX, officeholder (Iving expense)
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/09/2024	TDCJ
	Amount (\$)	Payee address; City; State; Zip Code
	\$259.80	8801 South 1st Street
		Suite 100
		Austin, TX 78748
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
	LAI LINDITORE	Candidate/Officeholder/Political Committee
		East End Chamber Gala
	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/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: 19/21 Rpt: 38/40	Perez, Mary Ann G. (The Honorable) 00068026							
4	Date	5 Payee name							
	07/02/2024	Texas Ethics Commission							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$100.00	201 E 14th Street							
		Suite 10							
		Austin, TX 78701							
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 Personal Financial Statement Late Fee							
		1 croonar mandar statement Eate 1 cc							
9									
	expenditure to benefit C/OI	1							
	Date	Payee name							
	12/04/2024	Texas House Democratic Caucus							
Amount (\$) Payee address; City; State; Zip Code									
	\$1,500.00 PO Box 12453								
		Austin, TX 78711							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Dues Check if travel outside of Texas. Complete Schedule T.							
		Check if Austin, TX, officeholder living expense Dues							
Н	Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O	1							
	Date	Payee name							
	08/21/2024	Total Wine							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$189.93 18740 Gulf Freeway								
	Friendswood, TX 77546								
	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 Constituent Gifts							
		Consuluent Gills							
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O								
一									
1									
l									

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	<u> </u>								
	Sch: 20/21 Rpt: 39/40	Perez, Mary Ann G. (The Honorable) 00068026								
4	Date	5 Payee name								
	09/09/2024	Uber Eats								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$163.83									
		San Francisco, CA 94105								
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.								
		Check if Austin, TX, officeholder living expense								
		Elected's Meeting								
_	2									
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	11/12/2024	Walmart								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$304.78	1107 Shaver Street								
		Pasadena, TX 77506								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF EXPENDITURE	Office Overhead/Rental Expense								
	EXPENDITORE	Check if Austin, TX, officeholder living expense								
	Office Supplies									
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	11/15/2024	Walmart								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$133.44	1107 Shaver Street								
		Pasadena, TX 77506								
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description								
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		Office Supplies								
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/O	1								

SCHEDULE F1

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

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

Candidate/Officeholder/Political Committee Credit Card Payment		I Committee	Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.				OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER NAM	ИΕ				3	Filer ID	(Ethics Commission Filers)	
	Sch: 21/21 Rpt: 40/40		ary Ann G. (The Honorab	le)				00068026		
4	Date	5 Payee nam	5 Payee name							
	11/20/2024	Walmart								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$149.39	1107 Shaver Street								
		Pasadena	ı, TX 77506	-						
8	PURPOSE OF		(See Categories listed at the top of th	is schedule)	(b)	Description				
	EXPENDITURE	Office Ove	erhead/Rental Expense					de of Texas. Com		
						Supplies	, IA,	officeholder living	expense	
						Supplies				
_	Compulate ONLY if direct	Condidate/O	ffi a a la al dia una una a	Office				Office he	al al	
9	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	gnt			Office he	eia	
	Date	Payee nam	ie							
	12/14/2024	Walmart								
	Amount (\$)	Payee add	ress; City; S	state; Zip Co	de					
	\$365.74	1107 Sha	ver Street							
		Pasadena	ı, TX 77506							
	PURPOSE		(See Categories listed at the top of th	is 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				
						Office TV	, IX,	omcenoider living	expense	
						Office 1 v				
_	Complete ONLY if direct	Candidata/O	fficeholder name	Office sou	aht			Office he	old.	
	expenditure to benefit C/O		iliceriolaei name	Office Sou	yııı			Office fie	au	
1										