### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	n Guide explains how to co	nplete this form.	1 Filer ID (Ethics Commis 00069497	,	2 Total pages	s filed: 10
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		USE ONLY
OFFICEHOLDER NAME	The Honorable	Alyssa G.			Date Received	
					ELECTRONI	CALLY FILED
					01/12/2025	-
	NICKNAME	LAST Perez		SUFFIX	01/12/2020	
4 CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivere	d or Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 21					
ADDRESS					Receipt #	Amount
Change of Address	Canutillo, TX 79835				Data Drassand	
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Mrs.	Enriqueta G.				
		-				
	NICKNAME	LAST			SUFFIX	
	Queta	Fierro				
6 CAMPAIGN	STREET ADDRESS (NO F	PO BOX PLEASE);	AP	/ SUITE #; CITY;	S	TATE; ZIP CODE
TREASURER	8612 Whitus Dr.	,,				·
ADDRESS						
(Residence or Business)	El Paso, TX 79925					
	LIT 030, TX 73523					
7 CAMPAIGN	AREA CODE PHO	ONE NUMBER	EXTENSION			
TREASURER PHONE	(915) 778-0905					
8 REPORT TYPE	X January 15	30th day before	alastian 🗖	Dupoff	1 Eth doy, offer	compaign traceuror
	X January 15			Runoff		campaign treasurer officeholder only)
	July 15	8th day before	election	Exceeded modified	Final Report (A	Attach C/OH-FR)
		_		reporting limit	_	
9 PERIOD	Month Day Yea	r		Month Day	Year	
COVERED	07/01/2024	Tł	ROUGH	12/31/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	r   🗌 F	Primary	Runoff	Other	
			General	Special		
				<u> </u>		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	District Judge District 21	0 El Paso		District Judge Di		
				I		
		601	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.et	hics.state.tx.u	6	Ver	sion V4.1.0.5dd2ace2

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

FORM JC/OH COVER SHEET PG 2 2 of 10

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13 C / OH NAME	Perez, Alyssa G. (Th	e Honorable)	14 Filer ID 00069497	(Ethics Comr	nission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	itures made by political at the candidate's or officient of the candidate is the candidate is the candidate is the control of	ceholder's kno	wledge or		
Additional Pages		COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRI	ESS		
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE EL		\$	0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOA	NS)	\$	0.00
EXPENDITURE TOTALS	EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	1,201.90
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE	LAST DAY OF THE	\$	9,661.42
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS A TING PERIOD	S OF THE LAST DAY	\$	0.00
17 AFFIDAVIT					
		I swear, or affirm, under pena true and correct and includes under Title 15, Election Code	all information required		
		The Hor	norable Alyssa G. Pe	rez	
		Signature	of Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE			
		aid	, this the		_day
of	, 20, to c	ertify which, witness my hand and seal of office.			
Signature of offic	cer administering oath	Printed name of officer administering oath	Title of offic	er administerir	ig oath
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx.us		Version V4.	1.0.5dd2ace2

#### FORM JC/OH PG 3 3 of 10

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COVER SHE	ET F

18 FILER NAM Perez, Aly	IE ssa G. (The Honorable)	<b>19</b> Filer ID 00069497	(Eth	ics Commission Filers)						
	20 SCHEDULE SUBTOTALS NAME OF SCHEDULE									
NAME OF S	╞	SUBTOTAL AMOUNT								
1. X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	0.00						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$							
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$							
4. X	SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00						
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	1,201.90						
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$							
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI	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 TO FILER	RETURNED	\$							

SUBTOTALS - JC/OH

	LOANS (JUDICIAL)	schedule <b>E(</b>	J)			
	The Instruction Guide explains how to complete this f	ages Schedule E(J): /1 Rpt: 4/10				
2	FILER NAME Perez, Alyssa G. (The Honorable)		3 Filer ID 000694	(Ethics Commission File 497	ers)	
4	TOTAL OF UNITEMIZED LOANS			\$	0.00	
5	Date of loan   7   Name of lender   Image: out-of-state PA	AC (ID#:	)	9 Loan Amount (\$)		
6	Is lender a <b>8</b> Lender address; City; State; financial institution?	Zip Code		10 Interest Rate		
				11 Maturity Date		
12	2 Lender's Principal Occupation	13 Lender's Job Title				
14	Lender's Employer/Law Firm	15 Law Firm of lender's spous	se (if any)			
16	If lender is child, law firm of parent(s) (if any)					
17	Description of Collateral	18 Check if personal funds we	ere deposited	d into political account (See Instructions)		
19	OGUARANTOR     20 Name of guarantor       INFORMATION			22 Amount Guaranteed	(\$)	
	not applicable <b>21</b> Guarantor address; City; State;	Zip Code				
23	Guarantor's Principal Occupation	24 Guarantor's Job Title				
25	Guarantor's Employer/Law Firm	<b>26</b> Law Firm of guarantor's spouse (if any)				
27	If guarantor is child, law firm of parent(s) (if any)					

			EXPENDITU	RE CATEGOR	RIES FOF	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expe Gift/Awards/Memoria ttee Legal Services The Instruction C	s Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 FI	LER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/6 Rpt: 5/10		erez, Alyssa G. (The Hor	norable)				00069497	
4	Date 07/03/2024		ayee name ktraspace Storage						
6	Amount (\$) \$108.00	7:	ayee address; City; 15 S. Desert anutillo, TX 79835	State;	; Zip Co	de			
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at ffice Overhead/Rental E		edule)			de of Texas. Com officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office he	eld
	Date	Pa	ayee name						
	08/04/2024	E	ktraspace Storage						
	Amount (\$) \$108.00	73	ayee address; City; 15 S. Desert anutillo, TX 79835	State;	; Zip Co	de			
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at ffice Overhead/Rental E		iedule)			de of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office he	eld
	Date	Pa	ayee name						
	09/04/2024		ktraspace Storage						
	Amount (\$) \$108.00		ayee address; City; .15 S. Desert	State;	; Zip Co	de			
		С	anutillo, TX 79835						
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at ffice Overhead/Rental Ex	•	edule)			de of Texas. Com officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ght		Office he	eld

			EXPENDIT	JRE CATEGO	RIES FOF	BOX 8(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-	als Expense	Office Ove Polling Ex Printing Ex Salaries/W			Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	-ILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 2/6 Rpt: 6/10		Perez, Alyssa G. (The Ho	norable)				00069497	
4	Date 10/04/2024		Payee name Extraspace Storage						
6	Amount (\$) \$108.00		Payee address; City; 7115 S. Desert Canutillo, TX 79835	State;	; Zip Co	de			
8	PURPOSE OF EXPENDITURE		Category (See Categories listed ) Office Overhead/Rental E		edule)			de of Texas. Comp , officeholder living	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office he	ld
	Date		Payee name						
	11/04/2024		Extraspace Storage						
	Amount (\$) \$108.00		Payee address; City; 7115 S. Desert Canutillo, TX 79835	State;	; Zip Co	de			
	PURPOSE OF EXPENDITURE		Category (See Categories listed) Office Overhead/Rental E		edule)			de of Texas. Comp officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office he	ld
	Date		Payee name						
	12/04/2024		Extraspace Storage						
	Amount (\$) \$108.00		Payee address; City; 7115 S. Desert	State;	; Zip Co	de			
			Canutillo, TX 79835						
	PURPOSE OF EXPENDITURE		Category (See Categories listed) Office Overhead/Rental E		edule)			de of Texas. Comp , officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	ght		Office he	ld

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/R Fees Office Overhead/R Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense	Reinbursement Solicitation/Fundraising Expense ental Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ontract Labor OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	ILER NAME	3 Filer ID (Ethics Commission Filers)			
	Sch: 3/6 Rpt: 7/10	erez, Alyssa G. (The Honorable)	00069497			
4	Date 08/30/2024	ayee name Sigi's Playhouse El Paso				
6	Amount (\$) \$150.00	ayee address; City; State; Zip Code 50 Sunland Park Drive El Paso, TX 79912				
8	PURPOSE OF EXPENDITURE	Contributions/Donations Made By	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense olf tournament sponsorship			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held			
	Date	ayee name				
	07/20/2024	ierra Springs				
	Amount (\$) \$29.97	ayee address; City; State; Zip Code 2.O. Box 660579 Dallas, TX 75266				
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) (b) Do	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense /ater			
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held			
	Date	ayee name				
	09/14/2024	ierra Springs				
	Amount (\$) \$43.96	ayee address; City; State; Zip Code P.O. Box 660579				
		allas, TX 75266				
	PURPOSE OF EXPENDITURE	iood/Beverage Expense	escription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense /ater			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Office sought	Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor ns how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	LER NAME		3 Filer ID (Ethics Commission Filers)		
	Sch: 4/6 Rpt: 8/10	erez, Alyssa G. (The Honorable)		00069497		
4	Date 10/12/2024	iyee name erra Springs				
6	Amount (\$) \$29.97	ayee address; City; Sta O. Box 660579 allas, TX 75266	te; Zip Code			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Water				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sought	Office held		
	Date	ayee name				
	12/02/2024	uncitycats				
	Amount (\$) \$100.00	ayee address; City; Sta 035 Belvidere Paso, TX 79912	te; Zip Code			
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this ontributions/Donations Made By andidate/Officeholder/Political Con	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	didate/Officeholder name	Office sought	Office held		
	Date	ayee name				
	07/12/2024	estside Democrats				
	Amount (\$) \$40.00	ayee address; City; Sta 05 Valplano	te; Zip Code			
		Paso, TX 79912				
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this ontributions/Donations Made By andidate/Officeholder/Political Con	Check if trave	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	didate/Officeholder name	Office sought	Office held		

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 5/6 Rpt: 9/10		Perez, Alyssa G. (The Honorable)				00069497
4	Date	5	Payee name				
	08/12/2024		Westside Democrats				
6	Amount (\$)	7		Zip Co	de		
	\$40.00		405 Valplano				
			El Paso, TX 79912				
8	PURPOSE	(a)			(b) Description		
ľ	OF	(a)	Category (See Categories listed at the top of this sche Contributions/Donations Made By	edule)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE		Candidate/Officeholder/Political Commi	ittee	Check if Austin	, тх	officeholder living expense
					Donation		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	Jht		Office held
	Date		Payee name				
	10/10/2024		Westside Democrats				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$40.00		405 Valplano				
			El Paso, TX 79912				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Contributions/Donations Made By				de of Texas. Complete Schedule T. officeholder living expense
			Candidate/Officeholder/Political Commi	ittee	Donation	, 17,	unicenoider living expense
	Complete ONLY if direct		Candidate/Officeholder name O	office sou	jht		Office held
	expenditure to benefit C/OI	4					
	Date		Payee name				
	11/17/2024		Westside Democrats				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$40.00		405 Valplano				
			El Paso, TX 79912				
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		de ef Teures, Complete Cebe tota T
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commi	ittoo			de of Texas. Complete Schedule T. , officeholder living expense
				lice	Donation	,	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Officeholder name O	office sou	Jht		Office held
⊢							

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Gard F dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 6/6 Rpt: 10/10	2 FILER NAME Perez, Alyssa G. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069497
4	Date 12/10/2024	5 Payee name Westside Democrats	I
6	Amount (\$) \$40.00	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>405 Valplano</li> <li>El Paso, TX 79912</li> </ul>	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held