CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to compl	ete this form.	1 Filer ID (Ethics Commis 00084428	sion Filers)	2 Total pages f	filed: 46
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Erin E.			Date Received	
''''					ELECTRONIC	VIIVEILED
						ALLI FILLD
	NICKNAME	LAST		SUFFIX	01/15/2025	
		Gamez				
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	777 E. Harrison					
ADDRESS	Suite C				Receipt #	Amount
Change of Address	Brownsville, TX 78520					
	Diownsville, 1X 70320				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER	MS / MRS / MR	FIRST		MI		
NAME	Ms.	Jaime S.				
	NICKNAME	LAST		SUFFIX		
		Gomez		M.D.		
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	APT	/ SUITE #; CITY	; ST	ATE; ZIP CODE
TREASURER	5700 N. Expressway 77/83					
ADDRESS	Suite 100					
(Residence or Business)						
	Brownsville, TX 78526					
7 CAMPAIGN	AREA CODE PHON	IE NUMBER E	XTENSION			
TREASURER	(956) 504-7121					
PHONE						
8 REPORT						
TYPE	X January 15	30th day before	election	Runoff		ampaign treasurer
		- -		-	appointment (off	
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Att	tach C/OH-FR)
9 PERIOD COVERED	Month Day Year			Month Day	Year	
COVERED	07/01/2024	TH	IROUGH	12/31/20	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE	_	
	Month Day Year	P	rimary	Runoff	Other	
		│ ∏G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)	l		12 OFFICE SOUGH	 T (if known)	
	State Representative Distr	rict 38 Cameron			,	
				1		
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 46

13 C / OH NAME	Gamez, Erin E. (The	Honorable)	14 Filer ID (00084428	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expenditor. These expenditures may have been made without officeholders are required to report this information.	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
⊔ °	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA ES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$ 200.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$ 111,164.26
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 1,219.08	
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 32,342.18
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 117,513.71
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 53,432.00
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.		
		The Hon	orable Erin E. Game:	Z
		Signature of	Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	OVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	rtify which, witness my hand and seal of office.		
Signature of offi	cer administering	Printed name of officer administering	Title of officer	r administering oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

			3 of	f 46
18 FILER NAM		19 Filer ID	(Ethics Commission Filer	s)
	Erin E. (The Honorable)	00084428	T	
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUN	NT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 110,5	550.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 6	514.26
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE E: LOANS		\$	
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 32,3	342.18
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 F TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/22 Rpt: 4/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 11/18/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
0	Dringinal occu	EDINBURG, TX 78540 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Fillicipal occu	oation / Job title (See instructions)	e Employer (See Instructions	,		
	Date 09/18/2024	Full name of contributor out-of-state PAC (ID#: AEP PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Dringing agg	AUSTIN, TX 78701	Employer (Coo Instructions			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 10/18/2024	Full name of contributor out-of-state PAC (ID#:_ARANSAS-CORPUS CHRISTI PILOTS PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		CORPUS CHRISTI, TX 78403				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 08/23/2024	Full name of contributor out-of-state PAC (ID#:_ ASSOCIATION OF GENERAL CONTRACTORS 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)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_AYALA, JOSE LUIS Contributor address; City; State; Zip Code HARLINGEN, TX 78711			Amount of Contribution (\$)	\$3,000.00
	Principal occu PRESIDENT	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	IS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete th	is for	m.	1	Total pages Schedule A1: Sch: 2/22 Rpt: 5/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/04/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	BROWNSVILLE, TX 78520 pation / Job title (See Instructions)	9	Employer (See Instructions	 		
	PHYSICIAN	,		SELF	,		
	Date 08/06/2024	Full name of contributor out-of-state PAC (I American Federation of Teachers Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Brownsville, TX 78521					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 12/12/2024	Full name of contributor	ID#:)		Amount of Contribution (\$)	\$2,500.00
	Dein ein el e e e e	HOUSTON, TX 77007		Fundamental Control of the Control o	<u></u>		
	Attorney	pation / Job title (See Instructions)		Employer (See Instructions Arnold & Itkin	5)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (I BEER ALLIANCE OF TEXAS PAC 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)		
	Date 10/17/2024	Full name of contributor out-of-state PAC (IBNSF RAILPAC Contributor address; City; State; Zip Code FORT WORTH, TX 76161	I ID#:)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/22 Rpt: 6/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ BRAZOS SANTIAGO PILOTS LLC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Deine in all a servi	LOS FRESNOS, TX 78566	O Familia va (Cara lastavativa			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_Benson, Arnold (Mr.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Brownsville, TX 78521 pation / Job title (See Instructions)	Employer (See Instructions	\		
	OWNER	pation / 300 title (3ee instructions)	PERFECT CRAB	,		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_ CANALES (DR), RICARDO Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
		EDINBURG, TX 78539				
	Principal occu PHYSICIAN	pation / Job title (See Instructions)	Employer (See Instructions SELF)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:_ CASTILLO, EVELYN Contributor address; City; State; Zip Code MCALLEN, TX 78504)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_ CENTRAL PINES PSYCH. PLLC Contributor address; City; State; Zip Code BASTROP, TX 78602)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/22 Rpt: 7/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 11/14/2024	5 Full name of contributor out-of-state PAC (ID#:_ CHARTER COMMUNICATIONS, INC TEXAS F 6 Contributor address; City; State; Zip Code	CHARTER COMMUNICATIONS, INC TEXAS PAC		Amount of Contribution (\$)	\$500.00
_		AUSTIN, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 10/03/2024	Full name of contributor x out-of-state PAC (ID#:_CHEVRON EMPLOYEESPAC Contributor address; City; State; Zip Code	C00035006)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	SAN RAMON, CA 94583 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ COWEN, JOHN F. Contributor address; City; State; Zip Code BROWNSVILLE, TX 78520			Amount of Contribution (\$)	\$2,500.00
	Principal occu PRESIDENT	pation / Job title (See Instructions)	Employer (See Instructions COWEN GROUP, LTD)		
	Date 11/20/2024	Full name of contributor out-of-state PAC (ID#:_ COWEN, MICHAEL Contributor address; City; State; Zip Code San Antonio, TX 78201			Amount of Contribution (\$)	\$2,500.00
	Principal occu ATTORNEY	pation / Job title (See Instructions)	Employer (See Instructions COWEN, RODRIGUEZ)		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_Colon, Javier Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526			Amount of Contribution (\$)	\$250.00
	Principal occu UNEMPLOY	pation / Job title (See Instructions) ED	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: 5/22 Rpt: 8/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/05/2024	5 Full name of contributor out-of-state PAC (ID#: DIETRICH, WILLIAM 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_		BROWNSVILLE, TX 78520				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 08/14/2024	Full name of contributor out-of-state PAC (ID#:_ Essential Utilities, Inc Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Dringinal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	,		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_FERNANDEZ, JOEL Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$150.00
		BROWNSVILLE, TX 78520				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/14/2024	Full name of contributor out-of-state PAC (ID#:_FLORES, ENRIQUE Contributor address; City; State; Zip Code AUSTIN, TX 78735			Amount of Contribution (\$)	\$1,000.00
	Principal occu VICE PRES	pation / Job title (See Instructions) IDENT	Employer (See Instructions MADHOUSE DEVELOP		ENT	
	Date 11/07/2024	Full name of contributor out-of-state PAC (ID#:_FORSHAGE, JOSEPH Contributor address; City; State; Zip Code EDINBURG, TX 78541			Amount of Contribution (\$)	\$1,000.00
	Principal occu PRESIDENT	pation / Job title (See Instructions)	Employer (See Instructions FOREMOST PAVING)		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to com	plete this forn	n.	1	Total pages Schedule A1: Sch: 6/22 Rpt: 9/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/05/2024	 Full name of contributor out-of- Fulghum, Edwin Neel (Mr.) Contributor address; City; State; Zip C)	7	Amount of Contribution (\$)	\$1,500.00
_	5	Brownsville, TX 78526		<u> </u>			
8	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions Sierra Title Company)		
	Date 12/06/2024	Full name of contributor out-of-GARCIA, MIGUEL Contributor address; City; State; Zip C)		Amount of Contribution (\$)	\$100.00
	Principal occur	BROWNSVILLE, TX 78520 pation / Job title (See Instructions)		Employer (See Instructions)		
	i illoipai occu	pation 7 oob title (See motitudions)		Employer (See mondenons	,		
	Date 12/08/2024	GILLIAM, Lance Contributor address; City; State; Zip C	state PAC (ID#: ode)		Amount of Contribution (\$)	\$250.00
	Principal occu	HOUSTON, TX 77019 pation / Job title (See Instructions)		Employer (See Instructions)		
	REAL ESTA			CONCENTRIC COMMU	•	TY ADVISORS	
	Date 12/05/2024	Garza, DANIEL (Mr.)				Amount of Contribution (\$)	\$2,000.00
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions SELF)		
	Date 12/04/2024	Full name of contributor out-of-Garza, Robert (Mr.) Contributor address; City; State; Zip C BROWNSVILLE, TX 78521	state PAC (ID#:)		Amount of Contribution (\$)	\$300.00
	Principal occu ATTORNEY	pation / Job title (See Instructions)		Employer (See Instructions SELF EMPLOYED)		
			,				

	MONET	ARY POLITICAL CONTRIBUTI	ON	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 7/22 Rpt: 10/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/03/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$100.00
_		HOUSTON, TX 77098			Ĺ		
8	Principal occu PROJECT M	pation / Job title (See Instructions) IANAGER	9	Employer (See Instructions HARRIS COUNTY PRE		NT 4	
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID: Gonzalez, Sylvia Contributor address; City; State; Zip Code HARLINGEN, TX 78552				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	REAL ESTA	TE BROKER		GISO REALTY			
	Date 12/02/2024	Full name of contributor out-of-state PAC (ID: Gregg, Kerry (Mr.) Contributor address; City; State; Zip Code	#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	_	Employer (See Instructions	·, 		
	MARKETING			Employer (See Instructions LAN, INC.COM	»)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID: HALFF ASSOCIATES-STATE PAC Contributor address; City; State; Zip Code RICHARDSON, TX 75081				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID: HCA TEXAS GOOD GOVT FUND Contributor address; City; State; Zip Code DALLAS, TX 75240				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/22 Rpt: 11/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/04/2024	5 Full name of contributor out-of-state PAC (ID#:_ HERMOSA LAW FIRM & MEDIATIONS, P.C. 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Daine in all account	BROWNSVILLE, TX 78520				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ HOUSTON PILOTS PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	DEER PARK, TX 77536 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ HS LAW PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/08/2024	Full name of contributor out-of-state PAC (ID#:_Harrington, Katie Contributor address; City; State; Zip Code HOUSTON, TX 77005			Amount of Contribution (\$)	\$500.00
	Principal occu LAWYER	pation / Job title (See Instructions)	Employer (See Instructions FOLEY & LARDNER LL			
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#:_Holzman, Harry (Mr.) Contributor address; City; State; Zip Code Brownsville, TX 78521)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Tax Consulta	pation / Job title (See Instructions) ant	Employer (See Instructions Holzman Group LTD)		

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 9/22 Rpt: 12/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/09/2024	5 Full name of contributor [INDEPAC6 Contributor address; City; Star	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$250.00
		AUSTIN, TX 78750					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Date 11/13/2024	Full name of contributor [INSURANCE AGENTS OF Contributor address; City; Star				Amount of Contribution (\$)	\$250.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	:)		
		, , , , , , , , , , , , , , , , , , , ,			,		
	Date 12/12/2024	Full name of contributor [Itkin, Jason Contributor address; City; Sta)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	HOUSTON, TX 77007 pation / Job title (See Instructions)		Employer (See Instructions	.)		
	Attorney	patient, cop the (eee mendenens)		Arnold & Itkin LLP	,		
	Date 12/05/2024	Full name of contributor JONES, GALLIGAN, KEY & Contributor address; City; Stat WESLACO, TX 78596)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/09/2024	Full name of contributor Johnson, Ann Contributor address; City; Star HOUSTON, TX 77256	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
		pation / Job title (See Instructions) RESENTATIVE		Employer (See Instructions STATE OF TEXAS	;)		
	<u> </u>			-			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE			
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 10/22 Rpt: 13/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	HOUSTON, TX 77007 pation / Job title (See Instructions)	9	Employer (See Instructions	 		
	MARKETING			ROSE INTERNATIONA			
	Date 12/02/2024	Full name of contributor)		Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID# LAW OFFICE OF SALVADOR GARCIA PLLC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		BROWNSVILLE, TX 78520					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID# LINEBARGER GOGGAN BLAIR SAMPSON LI Contributor address; City; State; Zip Code Austin, TX 78760	LC			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 11/04/2024	Full name of contributor out-of-state PAC (ID# LOPEZ, JOE L. Contributor address; City; State; Zip Code Brownsville, TX 78521)		Amount of Contribution (\$)	\$1,000.00
	Principal occu SELF	pation / Job title (See Instructions)		Employer (See Instructions BUSINESS OWNER	5)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBU		SCHEDULE A1			
	The Instruc	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 11/22 Rpt: 14/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/03/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$500.00
_	Dringing! aggs	BROWNSVILLE, TX 78526	- 10	Employer (Coo Instructions	_		
8	PHYSICIAN	pation / Job title (See Instructions)		Employer (See Instructions VALLEY BAPTIST MED		AL CENTER	
	Date 12/05/2024	Full name of contributor out-of-state PAC (Limas Jr., Fabian (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
	Dringing! aggs	BROWNSVILLE, TX 78526		Employer (Coo Instructions			
	ATTORNEY	pation / Job title (See Instructions)		Employer (See Instructions SELF EMPLOYED)		
	Date 12/11/2024	Full name of contributor ut-of-state PAC (Lowey, Adam Contributor address; City; State; Zip Code	(ID#:			Amount of Contribution (\$)	\$2,500.00
		Houston, TX 77003					
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Loewy Law Firm	5)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (Lozano, Kimberly Contributor address; City; State; Zip Code BROWNSVILLE, TX 78526)		Amount of Contribution (\$)	\$500.00
	Principal occu FIRM ADMIN	pation / Job title (See Instructions) VISTRATOR		Employer (See Instructions AMADOR LAW FIRM	5)		
	Date 09/23/2024	Full name of contributor out-of-state PAC (MARATHON PETROLEUM CORPORTATION Contributor address; City; State; Zip Code TEXAS CITY, TX 77590	ON EM			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			<u> </u>				

	MONET	ARY POLITICAL C	NS	SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 12/22 Rpt: 15/46		
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)	
4	Date 10/15/2024	5 Full name of contributor MCGUIREWOODS PAC6 Contributor address; City; St	x out-of-state PAC (ID#: C		7	Amount of Contribution (\$)	\$500.00	
		RICHMOND, VA 23219						
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instruction	s)			
	Date 11/18/2024	Full name of contributor MOAKCASEY LLC Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$500.00	
	Dringing! goog	AUSTIN, TX 78701	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Employer (See Instruction	<u></u>			
	Filicipal occu	pation / Job title (See Instructions)	Employer (See Instruction	3)			
	Date 12/02/2024	Full name of contributor Medina, Lisa Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$1,000.00	
		CORPUS CHRISTI, TX 78	i					
	Principal occu DOCTOR	pation / Job title (See Instructions)	Employer (See Instruction SELF EMPLOYED	s)			
	Date 08/26/2024	Full name of contributor NRG ENERGY PAC Contributor address; City; St PRINCTON, NJ 08450	x out-of-state PAC (ID#: <u>C</u> ate; Zip Code	COO366559)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)			
	Date 09/30/2024	Full name of contributor ONCOR TEXAS STATE F Contributor address; City; St DALLAS, TX 75202				Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	s)			
			l					

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 13/22 Rpt: 16/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 11/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ ONEOK EMPLOYEES PAC 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_	Deignaignal annu	AUSTIN, TX 78701	O Frankrige (Cook keets et ander			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_ PARRA Jr., JAIME Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions) MAN	Employer (See Instructions SELF)		
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#:_ PEBLEY, HOWARD TREY Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	MCALLEN, TX 78504 pation / Job title (See Instructions)	Employer (See Instructions)		
	CONSTRUC		FOREMOST PAVING	,		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_PRONTO BAIL BONDS Contributor address; City; State; Zip Code BROWNSVILLE, TX 78520)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/08/2024	Full name of contributor out-of-state PAC (ID#:_ Perez, Carolina Contributor address; City; State; Zip Code HOUSTON, TX 77002			Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions) PPLICATIONS SPECIALISTS	Employer (See Instructions GE HEALTHCARE)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 14/22 Rpt: 17/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/03/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00
0	Dringing oggu	Brownsville, TX 78526	_	Employer (See Instructions			
8	Doctor	pation / Job title (See Instructions)		Employer (See Instructions Texas Digestive Special		5	
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#: R.R.P. CONSULTING ENGINEERS Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$2,500.00
	Principal occu	MCALLEN, TX 78504 pation / Job title (See Instructions)		Employer (See Instructions			
	T mioipai occa			Employer (eee meadeans	,		
	Date 12/09/2024	Full name of contributor)		Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_RIDER, ZACHARY Contributor address; City; State; Zip Code HOUSTON, TX 77007				Amount of Contribution (\$)	\$1,000.00
	Principal occu PARTNER	pation / Job title (See Instructions)		Employer (See Instructions VINSON & ELKINS)		
	Date 12/05/2024	Full name of contributor				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 15/22 Rpt: 18/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)				3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 11/18/2024	5 Full name of contributor Ramirez, Rene6 Contributor address; City; S	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$1,500.00
g g	Principal occu	Edinburg, TX 78539 pation / Job title (See Instructions	2)	a	Employer (See Instructions	;) 		
_	Lobbyist	pation / Job title (See Instructions	·)	3	Self	•)		
	Date 11/26/2024	Full name of contributor SABINE PILOT PAC Contributor address; City; S	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$500.00
	Dringing! goog	PORT ARTHUR, TX 776- pation / Job title (See Instructions			Employer (See Instructions	<u>''</u>		
	Principal occu	pation / Job title (See Instructions	o)		Employer (See Instructions	·)		
	Date 11/18/2024	Full name of contributor SALDANA, AMANDA Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$1,500.00
		PHARR, TX 78577				Ĺ		
	Principal occu LOBBIST	pation / Job title (See Instructions	5)		Employer (See Instructions SELF	5)		
	Date 12/09/2024	Full name of contributor SIMONET, JULIET G Contributor address; City; S Manvel, TX 77578)		Amount of Contribution (\$)	\$250.00
	Principal occu ATTORNEY	pation / Job title (See Instructions	s)		Employer (See Instructions COZEN O'CONNOR	5)		
	Date 11/18/2024	Full name of contributor Saman, Suliman Contributor address; City; S MCALLEN, TX 78501	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$500.00
	Principal occu ORTHODON	pation / Job title (See Instructions	S)		Employer (See Instructions RODEO DENTAL AND		THODONTIST	

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A	A1		
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 16/22 Rpt: 19/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)			3	Filer ID (Ethics Commission Fil 00084428	ers)
4	Date 12/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	500.00
•	Principal occu	HOUSTON, TX 77252	٥	Employer (See Instructions	<u>''</u>		
0	NOT EMPLO	pation / Job title (See Instructions) DYED	9	Employer (See Instructions NA	·)		
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:_Sy, Stanley Contributor address; City; State; Zip Code				Amount of Contribution (\$)	500.00
	Deinainal assu	BROWNSVILLE, TX 78520			<u></u>		
	Pulmonol	pation / Job title (See Instructions) .OGIST		Employer (See Instructions VALLEY BAPTIST MED		AL CENTER	
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_ TEAMSTERS LOCAL UNION #988 Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$2,	500.00
	Deinainal assu	HOUSTON, TX 78520			<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	>)		
	Date 11/14/2024	Full name of contributor out-of-state PAC (ID#:_ TENET HEALTHCARE CORPORATION Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$	250.00
	Principal occu	DALLAS, TX 75254 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 11/14/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS AFL-CIO STATE COPE FUND Contributor address; City; State; Zip Code Austin, TX 78711			•	Amount of Contribution (\$)	500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 17/22 Rpt: 20/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 09/18/2024	5 Full name of contributor out-of-state PAC (ID#:_ TEXAS AGRICULTURAL COOPERATIVE COU 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
0	Dringing occu	ROUND ROCK, TX 78664	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 07/29/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS AUTOMOBILE DEALERS ASSN Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS LAND TITLE ASSN PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78703				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/02/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS OPTOMETRIC PAC Contributor address; City; State; Zip Code AUSTIN, TX 78705)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS PODIATRIC MEDICAL ASSOCIATION Contributor address; City; State; Zip Code AUSTIN, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDUI	LE A1	
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 18/22 Rpt: 21/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 11/22/2024	5 Full name of contributor out-of-state PAC (ID#:_ TEXAS REGIONAL BANK FEDERAL PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	HARLINGEN, TX 78552 pation / Job title (See Instructions)	Employer (See Instructions)		
	· ····o.pa ooda	panent cos and (cos menastro)				
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS SANDS PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$4,000.00
	Principal occu	AUSTIN, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions			
	i illicipai occu	pation 7 300 title (See Instructions)	Employer (See Instructions	,		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#: TEXAS STATE TEACHERS ASSN PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
		AUSTIN, TX 78759				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ TEXAS TRAIL 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 07/24/2024	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)		

	MONET	ARY POLITICAL CONTRIBUTIO	SCHEDULE A1			
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 19/22 Rpt: 22/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commissio 00084428	n Filers)
4	Date 10/04/2024	 Full name of contributor	00284885)	7	Amount of Contribution (\$)	\$1,000.00
_		WASHINGTON, WA 20004				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID#:_ THE LAW OFFICE OF ERIN H. GARCIA, PLLC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	D: : 1	BROWNSVILLE, TX 78520				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/06/2024	Full name of contributor out-of-state PAC (ID#: TOUCHY, HUGH P Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		BROWNSVILLE, TX 78521				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 09/19/2024	Full name of contributor out-of-state PAC (ID#: TREPAC-TEXAS ASSOCIATION OF REALTOR: Contributor address; City; State; Zip Code AUSTIN, TX 78768			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: TXANA PAC Contributor address; City; State; Zip Code AUSTIN, TX 78701)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 20/22 Rpt: 23/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/05/2024	5 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
8	Principal occu	RANCHO VIEJO, TX 78575 pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	r incipal occu	pation / 300 title (See Instructions)	5 Employer (See Instructions			
	Date 09/10/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Building Branch 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 08/05/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Democratic Women Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78703 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Medical Assn 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)		
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trucking Association PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/22 Rpt: 24/46	
2	FILER NAME Gamez, Erin	E. (The Honorable)		3	Filer ID (Ethics Commission 00084428	on Filers)
4	Date 12/05/2024	 Full name of contributor out-of-state PAC (ID#:_ Trevino III, Baldomero Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
8	Drincinal occu	BROWNSVILLE, TX 78521 pation / Job title (See Instructions)	9 Employer (See Instructions			
	GENERAL N	·	MR B MOTOR CO.	,		
	Date 09/10/2024	Full name of contributor X out-of-state PAC (ID#: UNION PACIFIC CORPORATION FUND FOR I	EFFECTIVE		Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
		,				
	Date 09/23/2024	Full name of contributor out-of-state PAC (ID#:_ VISTRA CORP Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		IRVING, TX 75039				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:_Villarreal, Rigoberto Contributor address; City; State; Zip Code Mission, TX 78572			Amount of Contribution (\$)	\$500.00
	Principal occu Director	pation / Job title (See Instructions)	Employer (See Instructions DJC Healthcare)		
	Date 11/29/2024	Full name of contributor out-of-state PAC (ID#:_WHOLESALE BEER DISTRIBUTORS OF TEX/Contributor address; City; State; Zip Code	AS		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

MONETARY POLITICAL CONTRIBUTIONS									
The Instruction Guide explains how to complete this form. FILER NAME 3									
2 FILER NAME Gamez, Erin E. (The Honorable)									
4 Date 5 Full name of contributor out-of-state PAC (ID#:) ZACHARY CORPORATION PAC 6 Contributor address; City; State; Zip Code									
tions)	Employer (See Instructions	s)							
Date Full name of contributor out-of-state PAC (ID#:) 11/18/2024 Zarrabi, Saam (Mr.) Contributor address; City; State; Zip Code									
tions)	Employer (See Instructions								
lions)	RODEO DENTAL)							
i i	out-of-state PAC (ID#: ATION PAC by; State; Zip Code Out-of-state PAC (ID#:	how to complete this form. out-of-state PAC (ID#:) ATION PAC ty; State; Zip Code 8265 tions) g Employer (See Instructions by; State; Zip Code ty; State; Zip Code							

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 26/46 3 Filer ID (Ethics Commission Filers) FILER NAME Gamez, Erin E. (The Honorable) 00084428 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor Date out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 11/22/2024 AGAVE DEMOCRATIC INFRASRUCTURE FUND \$375.00 COMMUNICATIONS 7 Contributor address; City; State; Zip Code CONSULTING **AUSTIN, TX 78763** Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 11/19/2024 MOAKCASEY LLC \$239.26 FOOD, BEVERAGE, Contributor address; City; State; Zip Code SPACE RENTAL AUSTIN, TX 78701 Check if travel outside of Texas. Complete Schedule T. (See instructions) Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) Contributor's principal occupation (FOR JUDICIAL) Contributor's job title (FOR JUDICIAL) (See instructions) Contributor's employer/law firm (FOR JUDICIAL) Law firm of contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica			ries/Wag	es/Contract Labor		OTHER (enter a	category not listed above)	
	Credit Card Payment		The Instruction Guide explains how t	o comp	olete this form.				
1	Total pages Schedule F1:	2 F	FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	Sch: 1/20 Rpt: 27/46	(Gamez, Erin E. (The Honorable)				00084428		
4	Date	ı	Payee name						
	12/31/2024	/	ACTBLUE FEES						
6	Amount (\$)	7 F	Payee address; City; State; Zip	Code)				_
	\$1,090.88	F	PO BOX 441146						
			SOMERVILLE, MA 02144						
8	PURPOSE	(a) (Category (See Categories listed at the top of this schedule)	(b) Description				
	OF EXPENDITURE	F	-ees		=		ide of Texas. Comp		
					2024 FEES	, 12	, officeholder living	expense	
					20241220				
9	Complete ONLY if direct	LC	andidate/Officeholder name Office	sough	nt		Office he	ld .	_
	expenditure to benefit C/O			3					
	Date	F	Payee name						=
	09/10/2024	l	AGAVE DEMOCRATIC INFRASTRUCTUR	E FU	ND				
	Amount (\$)	F	Payee address; City; State; Zip	Code	9				-
	\$500.00								
		/	AUSTIN, TX 78763						
	PURPOSE	(a) (Category (See Categories listed at the top of this schedule)	(b	Description				-
	OF EXPENDITURE		Contributions/Donations Made By		_	outs	ide of Texas. Comp	lete Schedule T.	
	EXPENDITURE	(Candidate/Officeholder/Political Committee		—	, TX	, officeholder living	expense	
					DONATION				
	2 2			Щ.			- ee .		_
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Officeholder name Office	sougn	IT		Office he	IO	
		<u> </u>							=
	Date	l	Payee name						
	09/03/2024		BETANCOURT-MEDELLIN, GEORGETTE						
	Amount (\$)	l	Payee address; City; State; Zip	Code					
	\$68.31		5749 HIDDEN OAKS						
		L .	BROWNSVILLE, TX 78526						
	PURPOSE OF	ı	Category (See Categories listed at the top of this schedule)	(b	Description		ide of Toy O-	doto Cobodulo T	
	EXPENDITURE	(OFFICE SUPPLIES		=		ide of Texas. Comp , officeholder living		
					WAGON	,	, =		

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

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 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: 2/20 Rpt: 28/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	11/01/2024	BETANCOURT-MEDELLIN, GEORGETTE
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$361.95	5749 HIDDEN OAKS
	!	
		BROWNSVILLE, TX 78526
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense CANDIES FOR CAMERON COUNTY SHERIFFS
	!	HALLOWEEN BASH, EXCEPTIONAL ER, BIG
_	0 1: 0 1: 0	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/02/2024	BETANCOURT-MEDELLIN, GEORGETTE
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	5749 HIDDEN OAKS
	!	
		BROWNSVILLE, TX 78526
	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
	!	LVLINI
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	12/18/2024	BETANCOURT-MEDELLIN, GEORGETTE
	Amount (\$)	Payee address; City; State; Zip Code
	\$83.61	5749 HIDDEN OAKS
	!	
	1	BROWNSVILLE, TX 78526
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	REIMBURSEMENT Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
	!	GIFT BAGS & PIONSIETTAS
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Conditate/Officeholder/Poli 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		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: 3/20 Rpt: 29/46	Gamez, Erin E. (The Honorable)	00084428
4	Date	5 Payee name	
	12/23/2024	BETANCOURT-MEDELLIN, GEORGETTE	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	5749 HIDDEN OAKS	
		BROWNSVILLE, TX 78526	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.
		CAMPAIGN A	TX, officeholder living expense
		CAMPAIGNA	A33I3TANCE
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/OI		Office field
	Data		
	Date 10/31/2024	Payee name BIG HEROES	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	5552 DOCKBERRY RD	
		BROWNSVILLE, TX 78521	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T. TX, officeholder living expense
		BIG CALEND	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	10/17/2024	BROWNSVILLE ANIMAL REGULATION & CARE CENTER	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	416 FM 511	
		OLMITO, TX 78575	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made by	outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee GALA	TX, officeholder living expense
		- Onla	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 4/20 Rpt: 30/46	Gamez, Erin E. (The Honorable) 00084428	
4	Date	5 Payee name	_
	07/22/2024	BROWNSVILLE CARDINALS	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$100.00	244 RESACA BLVD	
		BROWNSVILLE, TX 78520	
8	PURPOSE		_
Ū	OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		FLAG FOOTBALL TOURNAMENT	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experioration benefit C/O		
	Date	Payee name	
	09/03/2024	Brownsville Beerfest Assn	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$600.00	Market Square	
		Brownsville, TX 78520	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Contributions/Donations Made By	
	EXI ENDITORE	Candidate/Officeholder/Political Committee	
		SPONSORSHIP	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Data	David and the second se	=
	Date 07/25/2024	Payee name Brownsville Chamber of Commerce	
			_
	Amount (\$) \$550.00	Payee address; City; State; Zip Code 1600 University Blvd	
	Ψ550.00	1000 Offiversity blvd	
		Provide TV 70520	
		Browsville, TX 78520	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense	
		Membership Dues	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	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

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

	Consuling Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/20 Rpt: 31/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	12/30/2024	CHARRO DAYS INC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	455 E ELIZABETH ST.
		Brownsville, TX 78520
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		PARADE FEE
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/05/2024	CREATIVE PRINT
	Amount (\$)	Payee address; City; State; Zip Code
	\$415.68	1200 CENTRAL BLVD
	Ψ413.00	1200 GENTIAL BLVD
		BROWNSVILLE, TX 78520
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		MARKETING ITEMS-TENT, T-SHIRTS, ETC
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/08/2024	Cameron County Bar Assn
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	PO Box 3866
		Brownsville, TX 78523
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		SNEAKERS FOR STUDENTS
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	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 Printing Expense
Food Son/fee

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

	Candidate/Officeholder/Politica			Legal Services	is Expense	Salaries/V		se s/Contract Labor		OTHER (enter a	strict category not listed abov	e)
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	n Filers)
	Sch: 6/20 Rpt: 32/46		Gamez, Erir	n E. (The Hond	rable)					00084428		
4	Date	5	Payee name					•	_			
	11/14/2024			ounty Bar Assi	า							
6	Amount (\$)	7	Payee addres	ss; City;	State	e; Zip Co	de					
	\$100.00		PO Box 386	6								
			Brownsville,	TX 78523								
8	PURPOSE	(a)	Category (sc	e Categories listed a	the ten of this se	hodulo)	(b)	Description				
	OF	 ` ´		s/Donations M		neuule)	` ´	_ `	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			Officeholder/Po		nittee		ш		officeholder living	g expense	
								GOLF TOUR	NA	MENT		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld	
	Date		Payee name									
	07/30/2024		DELUXE CH	HECK								
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	de					
	\$71.24		PO BOX 419	9059								
			RANCHO C	ORDOVA, CA	95741							
	PURPOSE	(a)	Category (Se	e Categories listed a	the top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Accounting/l	Banking				_			plete Schedule T.	
								CHECK ORD		officeholder living	g expense	
								ONEON OND		`		
	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	aht			Office h	eld	
	expenditure to benefit C/O						5					
_	Date		Payoo namo									
	10/31/2024		Payee name	THE BORDER								
	Amount (\$)		Payee addres			e; Zip Co	,do					
	\$300.00		15 W MADIS	-	State	s, 2ip Co	ue					
	φ300.00		STE A	3011								
			Brownsville,	TV 70520								
		_				1						
	PURPOSE OF	(a) 	•	e Categories listed a	•	hedule)	(b)	Description Check if travel (nutsi	de of Texas, Com	plete Schedule T.	
	EXPENDITURE			s/Donations M Officeholder/Po		nittee				officeholder living		
								DONATION				
	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/O	Н										

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 7/20 Rpt: 33/46	2 FILER NAME Gamez, Erin E. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00084428
4	Date	5 Payee name
	09/12/2024	GARZA-PEREZ, SYLVIA
6	Amount (\$) \$300.00	7 Payee address; City; State; Zip Code PO BOX 4322 BROWNSVILLE, TX 78523
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense TICKETS
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/05/2024	GOMEZ, HECTOR
	Amount (\$)	Payee address; City; State; Zip Code
	\$395.00	1244 PINION DR
		BROWNSVILLE, TX 78526
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxon Complete Schedule T
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense TENTS AND TABLES
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/31/2024	GOOD NEIGHBOR SETTLEMENT HOUSE
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1254 E TYLER
		BROWNSVILLE, TX 78520
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense BLACK AND WHITE COCKTAIL
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Com		Gift/Awards/Me Legal Services				ages.	/Contract Labor		Travel Ou OTHER (6		strict category not listed above)	
L				i ne instruct	ion Guide e	expiains h	IOW TO COI	mple	ete this form.	_				
1	Total pages Schedule F1:	1								3			(Ethics Commission Filers	s)
_	Sch: 8/20 Rpt: 34/46	-	Gamez, Erir	E. (The F	Ionorable)					000844	128		
4	Date	5	Payee name											
	07/29/2024		Gamez, Val	erie										
6	Amount (\$)	7	Payee addres	s; City;		State;	Zip Co	de						
	\$500.00		5 Irapuato C	t										
	,		,											
			Drawnawilla	TV 70500										
L		⊢	Brownsville,											
8	PURPOSE OF		Category (Se				edule)	(b)	Description					
	EXPENDITURE		Transportati	on Equipn	nent And I	Related			브				plete Schedule T.	
			Expense						Check if Austin	, IX,	unicenoide	ı ııvıng	y expense	
									IVIOVING					
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offi	eholder na	me	0	ffice sou	ght			Offi	ce he	eld	
L	capenditule to belieff C/OI	' '												
	Date		Payee name						· · · · · · · · · · · · · · · · · · ·					
	08/07/2024		Gamez, Val	erie										
	Amount (\$)	\vdash	Payee addres	s; City;		State:	Zip Co	de						
	\$200.00	ı	5 Irapuato C	-		,	•							
	\$200.00		paa.o C	-										
			Duo	TV 70500										
			Brownsville,	TX 78526										
	PURPOSE OF	(a)	Category (Se	e Categories lis	sted at the top	of this sche	edule)	(b)	Description					
	OF EXPENDITURE		Fees						=				plete Schedule T.	
	-								Check if Austin		officeholde	er living	g expense	
									WIOVING AT	^				
_	0 1: 0:::::::::::::::::::::::::::::::::	<u> </u>												
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		andidate/Offic	enolder na	me	0	ffice sou	ght			Offi	ce he	eia	
	Date	_	Payee name								· <u> </u>			
	12/04/2024		HEB #446											
	Amount (\$)	İ	Payee addres	s; City;		State;	Zip Co	de						
	\$154.32		2155 PARE											
			BROWNSV	IIE TY 7	9521									
		-					ı	<i>a</i> :						
	PURPOSE OF		Category (Se		sted at the top	of this sche	edule)	(b)	Description	OI:+-	do of T-···		nloto Cohodula T	
	EXPENDITURE		Event Expe	ise					Check if travel				plete Schedule T.	
									FUNDRAISE		Smocribide		, onpolico	
									. 5.4517 1156	. `				
_	Complete ONLY if direct	$\overline{\Gamma}$	andidata/O#:	obolder re			ffice so:::	aht			Ott:	00 5	ald	
	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	enoluer na	me	U	ffice sou	ynı			Offi	ce he	tiu	
_														

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com 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 Cabadula F1:		.c)
1	Total pages Schedule F1: Sch: 9/20 Rpt: 35/46	2 FILER NAME Gamez, Erin E. (The Honorable) 3 Filer ID (Ethics Commission Filer 00084428	5)
4	Date	5 Payee name	
	08/14/2024	HERRERA, HECTOR	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$100.00	GENERAL DELIVERY	
		BROWNSVILLE, TX 78520	
8	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.	
	EXPENDITORE	Candidate/Officeholder/Political Committee	
		SA SOCCER TOURNAMENT-TICKETS	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
	experiorale to belieff C/Of	9.1	
	Date	Payee name	
	11/04/2024	IDEA RIVERVIEW ATHLETICS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	2115 W PIKE BLVD	
		WESLACO, TX 78596	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		T-SHIRT DONATION FOR TURKEY TROT RUN	
		TO SHIRK DOTATION TO MEET THE PROPERTY.	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
-	Date	Davies name	
	08/07/2024	Payee name JASON'S DELI	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$196.12	4365 N EXPWY 77	
L		BROWNSVILLE, TX 78520	
	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	
		R.C.R. REALTY LUNCHEON	
		R.C.R. REALIT LUNCHEON	
	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		OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 10/20 Rpt: 36/46	Gamez, Erin E. (The Honorable)	00084428
4	Date	5 Payee name	
	12/30/2024	KALLA, NICOLAS	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	903 HILLERY COVE	
		CEDAR PARK, TX 78613	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	T Odianes/ Wages/ Contract Easter	utside of Texas. Complete Schedule T.
		CAMPAIGN V	TX, officeholder living expense
		CAIVIF AIGN V	VOKK
_			200
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held
	Date	Payee name	
	12/18/2024	KOHLS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$175.37	15 W EXPRESSWAY 83	
		HARLINGEN, TX 78552	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	utside of Texas. Complete Schedule T.
		Carranació Ciniconolidadi/i Cinicali Committee	TX, officeholder living expense
		STUDENT GI	IER-SHARP ELEMENTARY FTS
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/08/2024	LEGISLATIVE SOLUTIONS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$350.00	PO BOX 5643	
		AUSTIN, TX 78763	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Liverit Expense	utside of Texas. Complete Schedule T.
			TX, officeholder living expense
		EMAIL DISTR	TIDO I TON
_	Complete ONLY 'C. I'	Condidate/Officeholder norma	Office heal-l
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

Advertising Expense Event
Accounting/Banking Fees
Consulting Expense Food/
Contributions/ Donations Made By - Gift/Ar

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		el Out of District ER (enter a category not listed above)
Ļ			
1	Total pages Schedule F1: Sch: 11/20 Rpt: 37/46		ID (Ethics Commission Filers) 84428
4	Date 08/19/2024	5 Payee name LETTUCE EAT SALAD	
6	Amount (\$) \$31.16	7 Payee address; City; State; Zip Code 3341 PABLO KISEL BLVD SUITE R BROWNSVILLE, TX 78526	
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 T Check if Austin, TX, officet FOOD AND BEVERA	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Office held
	Date	Payee name	
	07/01/2024	MATAR, CARYS (Miss)	
	Amount (\$) \$1,111.00	Payee address; City; State; Zip Code 2662 DEER TRAIL	
	DUDD 0.0-	BROWNSVILLE, TX 78521	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if travel outside of T Check if Austin, TX, officel SOCIAL MEDIA DIR	
	Complete ONLY if direct expenditure to benefit C/O	•	Office held
	Date 08/06/2024	Payee name MATAR, CARYS (Miss)	
	Amount (\$) \$1,111.00		
		BROWNSVILLE, TX 78521	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of T Check if Austin, TX, officet SOCIAL MEDIA DIR	
	Complete ONLY if direct expenditure to benefit C/O		Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ 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	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/20 Rpt: 38/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	09/02/2024	MATAR, CARYS (Miss)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,111.00	2662 DEER TRAIL
		BROWNSVILLE, TX 78521
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense SOCIAL MEDIA DIRECTOR
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	d
F	Date	Payee name
	11/01/2024	MATAR, CARYS (Miss)
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,111.00	2662 DEER TRAIL
		BROWNSVILLE, TX 78521
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense SOCIAL MEDIA DIRECTOR
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	12/01/2024	MATAR, CARYS
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,111.00	2662 DEER TRAIL
		BROWNSVILLE, TX 78521
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense SOCIAL MEDIA DIRECTOR
		SOCIAL WEDIA DIRECTOR
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/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: 13/20 Rpt: 39/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	12/31/2024	MATAR, CARYS
6	Amount (\$) \$1,111.00	7 Payee address; City; State; Zip Code 2662 DEER TRAIL BROWNSVILLE, TX 78521
_	DUDDOCE	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense SOCIAL MEDIA DIRECTOR
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/08/2024	MCDONALDS
	Amount (\$) \$9.17	Payee address; City; State; Zip Code 101 S EXPRESSWAY
		BROWNSVILLE, TX 78520
	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 FOOD
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/22/2024	MEXICAN AMERICAN LEGISLATIVE CAUCUS
	Amount (\$) \$750.00	Payee address; City; State; Zip Code 1108 Lavaca Street
		AUSTIN, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense 2024 MEMBERSHIP DUES
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al 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: 14/20 Rpt: 40/46	Gamez, Erin E. (The Honorable) 00084428	
4	Date	5 Payee name	
L	07/09/2024	MOODY CLINIC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$500.00	1901 E 22ND	
		BROWNSVILLE, TX 78521	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Contributions/Donations Made By	
	LAFLINDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		POINSIETTAS	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/OI	n	
	Date	Payee name	
	07/16/2024	NEXGEN	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$100.00	500 E MORRISION RD	
	,	SUITE 3	
_		BROWNSVILLE, TX 78526	_
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel queside of Taylor Complete Schedule T	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		BACK TO SCHOOL	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	\dashv
	expenditure to benefit C/OI		
\vdash	Data	Davies wares	_
	Date	Payee name	
	08/22/2024	NORTH BROWNSVILLE ROTARY	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$200.00	274 CREEKBEND DR	
L		BROWNSVILLE, TX 78521	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense	
		DONATION	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to beliefft C/OI		
_			

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Contributions/ Officials India Committee
Graduates/Officials India Committee

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: 15/20 Rpt: 41/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	10/21/2024	NORTH BROWNSVILLE ROTARY
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	274 CREEKBEND DR
		BROWNSVILLE, TX 78521
8	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 Check if Austin, TX, officeholder living expense TICKETS
		HONETS
9	Compulate ONII V if diseast	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	·	
	Date	Payee name
	08/07/2024	ORDER OF THE SERAPE
	Amount (\$)	Payee address; City; State; Zip Code
	\$262.00	304 PALO VERDE DR
		BROWNSVILLE, TX 78521
	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 MEMBERSHIP DUES
		WEWBERGIN BOES
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		
	Date	Payee name
	08/15/2024	PANDORA
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.40	2100 FRANKLIN ST
		STE 700
		OAKLAND, CA 94612
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		SUBSCRIPTION
L		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
1		

SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/20 Rpt: 42/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	11/19/2024	PINK APE MEDIA
6	Amount (\$) \$5,000.00	7 Payee address; City; State; Zip Code 1365 WILLOW DRIVE BROWNSVILLE, TX 78520
8	PURPOSE	(a) a
0	OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ENGAGEMENT AGENT
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/24/2024	RED MASS
	Amount (\$) \$750.00	Payee address; City; State; Zip Code 1910 UNIVERSITY BLVD
		BROWNSVILLE, TX 78520
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense DONATION
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/12/2024	RICARDO'S RESTAURANT
	Amount (\$) \$2,340.00	Payee address; City; State; Zip Code 425 E. 10TH ST.
		BROWNSVILLE , TX 78521
	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 VETERAN'S THANKSGIVING LUNCHEON
	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 Mac

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/20 Rpt: 43/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	11/07/2024	SAINT JOSEPH ACADEMY
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	101 SAINT JOSEPH DRIVE
		BROWNSVILLE, TX 78520
8	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
		TASTE OF THE TOWN
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_	Date	Payee name
	09/08/2024	SAINT JOSEPH ATHLETIC BOOSTER
	Amount (\$)	Payee address; City; State; Zip Code
	\$225.00	101 SAINT JOSEPH DRIVE
	Φ225.00	101 SAINT JOSEPH DRIVE
		BROWNSVILLE, TX 78520
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		AD
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiantare to benefit eyer	
	Date	Payee name
	12/30/2024	STUART, AVA
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	2936 BARTON SKYWAY
		AUSTIN, TX 78746
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		CAMPAIGN ASSISTANCE
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Gift/Awards/Memorials 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: 18/20 Rpt: 44/46	Gamez, Erin E. (The Honorable) 00084428	
4	Date	5 Payee name	
	12/10/2024	Southwest Airlines	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$299.97	2702 Love Field Dr	
		Dallas, TX 75235	
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	
		DLN IN-PERSON MEETING	
		BEN IN TENSOR INCE	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
\vdash	Date	Payee name	
	12/13/2024	Southwest Airlines	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$56.00	2702 Love Field Dr	
	Ψ30.00	2702 Love Field Bi	
		Dallas, TX 75235	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense AUSTIN VISIT-DATE CHANGE	
		AGETHATION BATTLE CHARGE	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		
-	Date	Payee name	
	12/11/2024	T G F FLOWERS	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$121.21	3902 FANNIN ST	
	¥==:==		
		HOUSTON, TX 77004	
	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 ALEJANDRA SALINAS	
		ALLVANDINA SALIIVAS	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Falaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	? FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/20 Rpt: 45/46	Gamez, Erin E. (The Honorable)	00084428
4	Date	Payee name	
	12/30/2024	TXTAG	
6	Amount (\$) \$9.32	Payee address; City; State; Zip Code PO BOX 650749 DALLAS, TX 75265	
Ļ	BUBBOOF	· · · · · · · · · · · · · · · · · · ·	
8	PURPOSE OF EXPENDITURE	Traver out or District	outside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	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 OF EXPENDITURE	1 663	outside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
L	11/07/2024	Uber	
	Amount (\$) \$10.92	Payee address; City; State; Zip Code unknown	
L		Austin, TX 78701	
	PURPOSE OF EXPENDITURE	Traver out of District	outside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Oh	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 Commit

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

	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: 20/20 Rpt: 46/46	Gamez, Erin E. (The Honorable) 00084428
4	Date	5 Payee name
	08/06/2024	VILLARREAL, TINO
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1001 E ELIZABETH
		BROWNSVILLE, TX 78520
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Pausa nama
	09/18/2024	Payee name WALMART
	Amount (\$)	Payee address; City; State; Zip Code
	\$124.47	702 SW 8TH ST
		BENTONVILLE, AZ 72716
	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/O	
_		