FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00081787 14 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Maya S. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Guerra Gamble CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Belinda NAME NICKNAME LAST **SUFFIX** Roberts **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 222-3509 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/03/2026 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 459 Travis District Judge District 459

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	Guerra Gamble, May	a S. (The Honor	able)	14 Filer ID 00081787	(Ethics Cor	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditure	ns accepted or political expen s may have been made withous required to report this informa	out the candidate's or of	ficeholder's kı	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAI	ME			
	GENERAL					
		COMMITTEE ADI	DRESS			
	SPECIFIC					
		COMMITTEE CAI	MPAIGN TREASURER NAMI	Ξ		
		COMMITTEE CAI	MPAIGN TREASURER ADDR	RESS		
16 CONTRIBUTION TOTALS			CONTRIBUTIONS(OTHER THE CONTRIBUTIONS MADE E		\$	0.00
		ICAL CONTRIBL		ANC)	\$	0.00
EXPENDITURE					\$	0.00
TOTALS 4. TOTAL POLITICAL EXPENDITURES					10.050.51	
	10111210211				\$	10,958.51
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF TH	E LAST DAY OF THE	\$	47,301.19
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ALL OUTSTANDING LOANS	AS OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under per true and correct and include under Title 15, Election Cod	s all information require	accompanyin d to be report	g report is ed by me
			The Honor	able Maya S. Guerra	Gamble	
				e of Candidate or Office		
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
			s my hand and seal of office.			
Signature of office	cer administering oath	Printed name	e of officer administering oath	Title of offi	icer administe	ring oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

		3 of 14		
l -	LER NAN Jerra Ga	19 Filer ID 00081787	(Ethics Commission Filers)	
I		E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT
1.		SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$ 10,958.51
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	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$ 230.99

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (party a category not listed above)

Candidate/Officeholder/Political Con Credit Card Payment	mmittee Legal Services Salaries The Instruction Guide explains how to	/Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F1: 2		`	Filer ID (Ethics Commission Filers)
	Guerra Gamble, Maya S. (The Honorable)	-	00081787
4 Date 5	Payee name		
01/07/2025	American Inns of Court		
\$65.00	Payee address; City; State; Zip C 225 Reinekers Ln Ste 770 Alexandria, VA 22314	Code	
8 PURPOSE (a)	Category (See Categories listed at the top of this schedule)	(b) Description	
OF	Fees		de of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, Barbara Jordan I	officeholder living expense Inn of Court fee
Complete ONLY if direct complete expenditure to benefit C/OH	Candidate/Officeholder name Office so	pught	Office held
Date	Payee name		
04/09/2025	Austin Bar Association		
Amount (\$)	Payee address; City; State; Zip C	Code	
\$100.00	712 W 16th St		
	Austin, TX 78701	[a]	
l OE I	Category (See Categories listed at the top of this schedule)	(b) Description	do of Toyon Complete Schedule T
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		de of Texas. Complete Schedule T. officeholder living expense
	Carriadate/Officeriolaci// Citical Committee	sponsorship of so	
Complete <u>ONLY</u> if direct Cexpenditure to benefit C/OH	Candidate/Officeholder name Office so	ought	Office held
Date	Payee name		
04/16/2025	Austin Bar Association		
· · /	Payee address; City; State; Zip C	Code	
\$150.00	712 W 16th St		
	Austin, TX 78701		
	Category (See Categories listed at the top of this schedule)	(b) Description	de of Taura Consultato Caba III T
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	<u> </u>	de of Texas. Complete Schedule T. officeholder living expense
	Candidate/Onicendide//Political Committee		charity golf tournament
			, ,
Complete ONLY if direct C expenditure to benefit C/OH	Candidate/Officeholder name Office so	pught	Office held

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	\neg
	Sch: 2/9 Rpt: 5/14	Guerra Gamble, Maya S. (The Honorable) 00081787	
4	Date	5 Payee name	
	04/16/2025	Austin Bar Association	
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 712 W 16th St Austin, TX 78701	
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	
		Sponsorship of Equity Summit	
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/01/2025	Austin Bar Foundation	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	712 W 16th St	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Charitable donation	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	04/18/2025	Austin Bar Foundation	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,100.00	712 W 16th St	
		Austin, TX 78701	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder Check if Austin, TX, officeholder living expense	
		Charitable donation	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
L	expenditure to benefit C/O	1	[

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 3/9 Rpt: 6/14	Guerra Gamble, Maya S. (The Honorable) 00081787
4	Date	5 Payee name
	05/08/2025	Austin Black Lawyers Foundation, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	14047 Fox Tail Cv
		Auctin TV 79704
8	PURPOSE	Austin, TX 78704 (a) Category (See Categories listed at the top of this schedule) (b) Description
٦	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
		Luncheon sponsorship
_	Operation Of the Control of the Cont	
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	Date	Payee name
	04/10/2025	Austin Young Lawyers Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	712 W 16th St
		Austin, TX 78701
	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
		Event Sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitie to belieff C/Of	
	Date	Payee name
	04/16/2025	Austin Young Lawyers Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$95.00	712 W 16th St
		Austin, TX 78701
	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 Dues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ 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 Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	<u> </u>	_
Ĺ	Sch: 4/9 Rpt: 7/14	Guerra Gamble, Maya S. (The Honorable) Guerra Gamble, Maya S. (The Honorable)	
4	Date	5 Payee name	
	06/13/2025	HABLA	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	3601 Far West Blvd Ste 204	
		Austin, TX 78731	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	
	EXPENDITURE	Candidate/Officeholder/Political Committee	
		Event Sponsorship	
_			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
L			
	Date	Payee name	
	06/23/2025	Klock's Electric	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$3,525.00	1813 Richcreek Rd	
		Austin, TX 78757	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Security Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Home Security	
		Thomas decumy	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
	Date	Payee name	_
	04/11/2025	Nespresso USA	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$120.22	111 W 33rd St Fl 5	
		New York, NY 10120	
	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	
		Coffee machine for staff	
		Solido Madillilo Idi Stati	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
			_

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 5/9 Rpt: 8/14	2 FILER NAME Guerra Gamble, Maya S. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00081787
4	Date 03/05/2025	5 Payee name Ring
6	Amount (\$) \$10.81	7 Payee address; City; State; Zip Code 12515 Cerise Ave
8	PURPOSE OF EXPENDITURE	Hawthorne, CA 90250 (a) Category (See Categories listed at the top of this schedule) Security (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Home Security
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 04/07/2025	Payee name Ring
	Amount (\$) \$10.81	Payee address; City; State; Zip Code 12515 Cerise Ave Hawthorne, CA 90250
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Security (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Home Security
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 05/05/2025	Payee name Ring
	Amount (\$) \$10.81	Payee address; City; State; Zip Code 12515 Cerise Ave
		Hawthorne, CA 90250
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Security (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Home Security
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guid			ens	se s/Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				[:	3	Filer ID	(Ethics Commission Filers)
	Sch: 6/9 Rpt: 9/14		Guerra Gamble, Maya S. (Th	ne Honora	ble)				00081787	
4	Date	5	Payee name				L			
	06/05/2025		Ring							
6	Amount (\$)	7	Payee address; City;	State:	Zip Cod	le				
Ĭ	\$10.81	ľ	12515 Cerise Ave	Otato,	p					
			Hawthorne, CA 90250							
8	PURPOSE OF	(a)	Category (See Categories listed at the t	top of this sche	edule) ((b)	Description			
	EXPENDITURE		Security						de of Texas. Com officeholder living	
							Home Security		omeeneder mang	, 6,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
							_			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name	0	office soug	ht			Office he	eld
		_								
	Date		Payee name							
	03/27/2025		State Bar of Texas							
	Amount (\$)		Payee address; City;	State;	Zip Cod	le				
	\$140.00		1414 Colorado St							
			Austin, TX 78701							
	PURPOSE	(a)	Category (See Categories listed at the t	top of this sche	edule) ((b)	Description			
	OF EXPENDITURE		Fees						de of Texas. Com	
							—	TX,	officeholder living	expense
							Bar Dues			
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name	0	Office soug	ht			Office he	eld
	expenditure to benefit C/O	Н			J					
	Date		Payee name							
	03/18/2025		Texans Care for Children							
	Amount (\$)		Payee address; City;	State;	Zip Cod	le				
	\$150.00		1016 La Posada Dr #240							
			Austin, TX 78752							
	PURPOSE OF	(a)	Category (See Categories listed at the t		edule) ((b)	Description			
	EXPENDITURE		Contributions/Donations Made Candidate/Officeholder/Politic		ittoo		Check if Austin		de of Texas. Com officeholder living	•
			Candidate/Officeriolder/Politic	ai Commi	illee		Charitable dor			гехрепас
	Complete ONLY if direct		Candidate/Officeholder name	0	Office soug	ht			Office he	eld
	expenditure to benefit C/O			_	9					

SCHEDULE F1

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

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

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 Travel Out of District

	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: 7/9 Rpt: 10/14	Guerra Gamble, Maya S. (The Honorable) 00081787
4	Date	5 Payee name
	05/27/2025	The Home Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$507.47	10515 N Mo Pac Expy
		Austin, TX 78759
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Security Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Items for the Security system
		Remarks of the desanty system
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	04/17/2025	Titaya's Thai Cuisine
	Amount (\$)	Payee address; City; State; Zip Code
	\$85.10	5501 N Lamar Blvd Ste C-101
		Austin, TX 78751
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Team building meal with staff
		and the same of th
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	01/14/2025	Travis County Women Lawyers Association Foundation
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	PO Box 160334
	,	
		Austin, TX 78716
	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
		Sponsorship of award inficient
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-		

SCHEDULE F1

Advertising Expense

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card F dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 8/9 Rpt: 11/14	Guerra Gamble, Maya S. (The Honorable)	00081787
4	Date	5 Payee name	
	01/13/2025	Travis County Women Lawyers Association	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$65.00	PO Box 160334	
		Austin TV 7071C	
_		Austin, TX 78716	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 003	n, TX, officeholder living expense
		Membership	Dues
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	04/16/2025	Travis County Women Lawyers Association	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$250.00	PO Box 160334	
		Austin, TX 78716	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	
	EXPENDITURE	Contributions/Donations Made By	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		Charitable do	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	1	
	Date	Payee name	
	04/29/2025	Travis County Women Lawyers	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$100.00	PO Box 160334	
		Austin, TX 78716	
	PURPOSE	1	
	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	ı, TX, officeholder living expense
		Sponsorship	
	Operation ONE VIII I	Out in the 10th of the later and the 10th of the 10th	Office hold
	Complete ONLY if direct expenditure to benefit C/OH	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 Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
		The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/9 Rpt: 12/14	Guerra Gamble, Maya S. (The Honorable) 00081787
4	Date	5 Payee name
	06/16/2025	United States Postal Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$210.00	475 L'Enfant Plz SW Rm 9431
		Washington, DC 20260
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Post Office Box rental
		Post Office Box Terital
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/09/2025	Vinaigrette Restaurant
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.48	2201 College Ave
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Team building meal with staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/30/2025	Volunteer Legal Services of Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	8801 Centre Park Dr Ste 120
	·	
		Austin, TX 78754
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Charitable donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		al pages Schedule K: n: 1/2 Rpt: 13/14	
2	FILER NAME	ble, Maya S. (The Honorable)	3		r ID (Ethics Commission File 081787	ers)
	Guerra Garri	bie, waya 5. (The horiorable)		000		
4	Date 01/09/2025	 Name of person from whom amount is received Frost Bank Address of person from whom amount is received; City; State; Zip Code 	8 Amount (\$)	\$2.11		
		San Antonio, TX 78296				
		7 Purpose for which amount is received	olitio	cal co	ontribution returned to filer	
	Date 02/10/2025	Name of person from whom amount is received Frost Bank Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78296			Amount (\$)	\$2.02
			olitio	cal co	Lentribution returned to filer	
	Date 03/10/2025	Name of person from whom amount is received Frost Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$1.75
		San Antonio, TX 78296				
			olitio	cal co	ontribution returned to filer	
		Interest on campaign checking account				
	Date 04/08/2025	Name of person from whom amount is received Frost Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$1.80
		San Antonio, TX 78296				
			olitio	cal co	I ontribution returned to filer	
	Date 05/08/2025	Name of person from whom amount is received Frost Bank Address of person from whom amount is received; City; State; Zip Code			Amount (\$)	\$1.75
		San Antonio, TX 78296				
		Purpose for which amount is received	olitio	cal co	ontribution returned to filer	

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 14/14 2 FILER NAME Filer ID (Ethics Commission Filers) Guerra Gamble, Maya S. (The Honorable) 00081787 8 Amount (\$) Date 5 Name of person from whom amount is received 06/09/2025 Frost Bank \$1.81 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78296 Purpose for which amount is received Check if political contribution returned to filer Interest on campaign checking account Amount (\$) Name of person from whom amount is received Date 01/13/2025 Guerra Gamble, Maya (Judge) \$219.75 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78755 Purpose for which amount is received Check if political contribution returned to filer Reimburse campaign account for expenditure made in error listed on previous report Schedule I