CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

_	Filer ID (Eth	ics Commission Filers)	2 Total pages filed:			OFFICI	E USE ONLY
	00040542		48			Date Received	
3	CANDIDATE /	MS / MRS / MR	FIRST		MI	ELECTRON	ICALLY FILED
	OFFICEHOLDER NAME	The Honorable	Trey			08/10/2025	
		NICKNAME	LAST		SUFFIX	"	
			Martinez Fische	-		Date Hand-delivere	ed or Date Postmarked
4	ORIGINAL	X January 15	Runoff	Other (s	pecify)		
	REPORT TYPE	July 15	Exceeded modified	reporting limit		Receipt #	Amount
		30th day before election	15th day after campappointment (office				
		8th day before election	Final Report (Attack	• • • • • • • • • • • • • • • • • • • •		Date Processed	
5	ORIGINAL PERIOD	Month Day Yea	ur	Month Day	Year	Date Imaged	
	COVERED	10/27/2024	THROUGH	12/31/2024			
6	EXPLANATION OF C	CORRECTION					
		ent data entry error and I ar			necessary corr	ections have bee	n made. The only
	changes were date el	ntries to reflect that contrib	itions were received b	efore the moratorium.			
		uesting a waiver and/or red					l no material changes
	were made to the res	t of the report. I also believ	e as of this liling no or	e nas inilialed a comp	nami with the i	EC.	
	AFFIDAVIT						
7	AFFIDAVIT			ear, or affirm, under pe	enalty of perjur	y, that this correc	cted report is true
7	AFFIDAVIT			ear, or affirm, under pe correct.	enalty of perjur	y, that this correc	cted report is true
7	AFFIDAVIT		and	· ·	, , ,		cted report is true
7	AFFIDAVIT		and Che	correct.	and all applica	able statements:	·
7	AFFIDAVIT		and	correct. ck the box next to any Semiannual reports was made in good fa	and all applicas: I swear, oaith and withou	able statements: r affirm that the o t an intent to misl	riginal report ead or to
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports	and all applicas: I swear, oaith and withou	able statements: r affirm that the o t an intent to misl	riginal report ead or to
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info	and all applicas: I swear, outline and without communication contains.	able statements: r affirm that the o t an intent to misl ined in the report	riginal report ead or to
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busine	able statements: r affirm that the o t an intent to misl ined in the report t, that I am filing t ess day after the	riginal report ead or to his corrected date I learned
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than that the report as original	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busing ginally filed is i	able statements: r affirm that the o t an intent to misl ined in the report I, that I am filing t ess day after the naccurate or inco	riginal report ead or to his corrected date I learned omplete. I
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busing ginally filed is is any error or o	able statements: r affirm that the o t an intent to misl ined in the report I, that I am filing t ess day after the naccurate or inco	riginal report ead or to his corrected date I learned omplete. I
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as orig swear, or affirm, that	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busing ginally filed is is any error or o	able statements: r affirm that the o t an intent to misl ined in the report I, that I am filing t ess day after the naccurate or inco	riginal report ead or to his corrected date I learned omplete. I
7	AFFIDAVIT		and Che	Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busin ginally filed is i any error or o ood faith.	able statements: r affirm that the o t an intent to misl ined in the report r, that I am filing t ess day after the naccurate or inco mission in the rep	riginal report ead or to his corrected date I learned implete. I port as originally
7	AFFIDAVIT		and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than that the report as orig swear, or affirm, that filed was made in go	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busing ginally filed is i any error or o ood faith.	able statements: r affirm that the o t an intent to misl ined in the report r, that I am filing t ess day after the naccurate or inco mission in the rep Martinez Fische	riginal report ead or to . his corrected date I learned emplete. I port as originally
7		AMP/SEALAROVE	and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than that the report as orig swear, or affirm, that filed was made in go	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busing ginally filed is i any error or o ood faith.	able statements: r affirm that the o t an intent to misl ined in the report r, that I am filing t ess day after the naccurate or inco mission in the rep	riginal report ead or to . his corrected date I learned emplete. I port as originally
7		AMP / SEAL ABOVE	and Che	correct. ck the box next to any Semiannual reports was made in good fa misrepresent the info Other reports: Is report not later than that the report as orig swear, or affirm, that filed was made in go	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busing ginally filed is i any error or o ood faith.	able statements: r affirm that the o t an intent to misl ined in the report r, that I am filing t ess day after the naccurate or inco mission in the rep Martinez Fische	riginal report ead or to . his corrected date I learned emplete. I port as originally
7	AFFIX NOTARY ST	AMP / SEAL ABOVE	and Che X	Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go The Hor Signatu	and all applica is: I swear, o aith and without ormation conta swear, or affirm the 14th busin ginally filed is i any error or o ood faith. horable Trey ire of Candidate	able statements: r affirm that the o t an intent to misl ined in the report n, that I am filing t ess day after the naccurate or inco mission in the rep Martinez Fische e or Officeholder	riginal report ead or to . his corrected date I learned implete. I port as originally
7	AFFIX NOTARY ST		and Che X	Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go The Hor Signatu	and all applica is: I swear, or aith and withour ormation conta iswear, or affirm the 14th busing ginally filed is it any error or or ood faith. horable Trey are of Candidate , this	able statements: r affirm that the o t an intent to misl ined in the report n, that I am filing t ess day after the naccurate or inco mission in the rep Martinez Fische e or Officeholder	riginal report ead or to . his corrected date I learned implete. I port as originally
7	AFFIX NOTARY ST	ribed before me, by the sai	and Che X	Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go The Hor Signatu	and all applica is: I swear, or aith and withour ormation conta iswear, or affirm the 14th busing ginally filed is it any error or or ood faith. horable Trey are of Candidate , this	able statements: r affirm that the o t an intent to misl ined in the report n, that I am filing t ess day after the naccurate or inco mission in the rep Martinez Fische e or Officeholder	riginal report ead or to . his corrected date I learned implete. I port as originally
7	AFFIX NOTARY ST	ribed before me, by the sai	and Che X	Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go The Hor Signatu	and all applica is: I swear, or aith and withour ormation conta iswear, or affirm the 14th busing ginally filed is it any error or or ood faith. horable Trey are of Candidate , this	able statements: r affirm that the o t an intent to misl ined in the report n, that I am filing t ess day after the naccurate or inco mission in the rep Martinez Fische e or Officeholder	riginal report ead or to . his corrected date I learned implete. I port as originally
7	AFFIX NOTARY ST Sworn to and subsc of	ribed before me, by the sai	and Che X X d ify which, witness my	Semiannual reports was made in good fa misrepresent the info Other reports: I s report not later than that the report as orig swear, or affirm, that filed was made in go The Hor Signatu	and all applica s: I swear, o aith and withou ormation conta swear, or affirm the 14th busin ginally filed is i any error or o od faith. norable Trey are of Candidat, this	able statements: r affirm that the o t an intent to misl ined in the report n, that I am filing t ess day after the naccurate or inco mission in the rep Martinez Fische e or Officeholder	riginal report ead or to . his corrected date I learned implete. I port as originally er day

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comple		1 Filer ID (Ethics Commit 00040542		2 Total pages file	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	The Honorable	Trey			Date Received ELECTRONICA	ALLY FILED
	NICKNAME	LAST	•••••	SUFFIX	08/10/2025	
		Martinez Fisch	ner			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT /	SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
MAILING	104 Babcock Road				December 11	Ta
ADDRESS	Ste. 107				Receipt #	Amount
Change of Address	San Antonio, TX 78201				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER		Joe		1411		
NAME		300				
	NICKNAME	LAST	•••••	SUFFIX		
		Bernal				
6 CAMPAIGN	STREET ADDRESS (NO PO I	SUA DI EVSEI:	Λ.D.	/ SUITE #; CITY;	STA	TE; ZIP CODE
TREASURER ADDRESS	6410 Laurelhill Dr.	BOX FLEASE),	AF	7 3011L #, CITT,	317	TIL, ZIF CODE
(Residence or Business)	San Antonio, TX 78229-483	35				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE (210) 342-2182	E NUMBER E	EXTENSION			
PHONE						
8 REPORT TYPE	X January 15	30th day before	election	Runoff	15th day after car appointment (offic	
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	
9 PERIOD COVERED	Month Day Year	TU	IROUGH	Month Day	Year	
	10/27/2024	In	IROUGH	12/31/202	24	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year		rimary	Runoff	Other	
		G	eneral	Special		
11 055105	OFFICE LIFE D (if a m.)			12 OFFICE COLICUS	C (if I was a was)	
11 OFFICE	OFFICE HELD (if any) State Representative Distri	ct 116 Bevar		12 OFFICE SOUGHT	tative District 116	
	State Representative Distri	ot 110 Bexai		State Represent	duve District 110	
	1					
		GO Т	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

3 of 48

13 C / OH NAME	Martinez Fischer, Tre	y (The Honorable)	14 Filer ID 00040542	(Ethics Cor	mmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures	accepted or political expendition may have been made without equired to report this information	the candidate's or office	ceholder's ki	nowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	E			
Ш	GENERAL					
		COMMITTEE ADD	RESS			
	SPECIFIC					
		COMMITTEE CAM	PAIGN TREASURER NAME			
		COMMITTEE CAM	PAIGN TREASURER ADDRE	SS		
16 CONTRIBUTION	1. TOTAL UNITEM	IZED POLITICAL CO	ONTRIBUTIONS (OTHER THA	IN PLEDGES, LOANS	i,	
TOTALS			CONTRIBUTIONS MADE ELE	CTRONICALLY)	\$	0.00
	(OTHER THAN I		OR GUARANTEES OF LOAN	S)	\$	91,784.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EX	(PENDITURES		\$	0.00
	4. TOTAL POLITIC	AL EXPENDITURE	S		\$	41,536.97
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		IS MAINTAINED AS OF THE L	AST DAY OF THE	\$	441,820.06
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		L OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
				ble Trey Martinez Fi		
AFFIX NO	TARY STAMP / SEAL AB	OVE	Signature	Candidate of Officers	older	
Sworn to and subs	cribed before me, by the s	aid	my hand and seal of office.	, this the		day
01	, 20, to c	erury writeri, withess	my nanu anu seai di dince.			
Signature of office	cer administering	Printed name	of officer administering	Title of office	er administe	ring oath

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				JVEI	4 of 48
	LER NAM		19 Filer ID	(Ethic	s Commission Filers)
		Fischer, Trey (The Honorable)	00040542		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	91,784.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	5,000.00
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$	8,577.79
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.	X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	32,959.18
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 I TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUI	LE A1
	The Instru	ction Guide explains how to comp	lete this form	n.	1	Total pages Schedule A1: Sch: 1/13 Rpt: 5/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 11/18/2024	5 Full name of contributor out-of-sta	ate PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	i)		
	Date 12/13/2024	Aghamalian, Brandon	ate PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
		Austin, TX 78746					
	Consultant	pation / Job title (See Instructions)		Employer (See Instructions Focused Advocacy LLC			
	Date 12/05/2024	Full name of contributor out-of-standard out-o	ate PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
		Irving , TX 75038					
	Principal occu Rancher	pation / Job title (See Instructions)		Employer (See Instructions Hatada Ranch	5)		
	Date 12/02/2024	Full name of contributor				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-star Association of Texas Professional Education Contributor address; City; State; Zip Cool Austin, TX 78752-3792				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
			I				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/13 Rpt: 6/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)		3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 11/21/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$3,000.00
_	5	Austin, TX 78752				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: Beef PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Amarillo, TX 79106				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Bexar County Justice PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,000.00
		San Antonio, TX 78232				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Brentwood Public Affairs Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Burger, Scott Contributor address; City; State; Zip Code San Antonio, TX 78217)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Climate Control	()		

	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: 3/13 Rpt: 7/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)		3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/12/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 12/04/2024	Full name of contributor	000397851		Amount of Contribution (\$)	\$750.00
	Dringing aggr	St. Louis, MO 63105 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	oation / Job title (See instructions)	Employer (See instructions	,		
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#:_ Centerpoint Energy Inc., PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77210-4567				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ DENPAC/Texas Dental Association Contributor address; City; State; Zip Code Austin, TX 78704)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Davis Kaufman PLLC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this fo	orn	n.	1	Total pages Schedule A1: Sch: 4/13 Rpt: 8/48	
2	FILER NAME					3	Filer ID (Ethics Commission	on Filers)
		cher, Trey (The Honorable)	_			L	00040542	
4	Date 11/28/2024	5 Full name of contributorEinstein, Edwin6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78230						
8	Principal occu attorney	pation / Job title (See Instructions	s) 	9	Employer (See Instructions self	5)		
	Date 10/28/2024	Full name of contributor Einstein, Edwin Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$10.00
		San Antonio, TX 78230						
	Principal occu attorney	pation / Job title (See Instructions	s) 		Employer (See Instructions self	5)		
	Date 11/15/2024	Full name of contributor Fairchild, David Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
		Southlake, TX 76092						
	Principal occu Nightclub Ov	pation / Job title (See Instructions vner	s)		Employer (See Instructions Self	5)		
	Date 12/12/2024	Full name of contributor Friends of UNT PAC Contributor address; City; S Dallas, TX 75380-3272	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	s)		
	Date 12/03/2024	Full name of contributor Friends of the University I Contributor address; City; S Austin, TX 78763)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>(</u>		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 5/13 Rpt: 9/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)				3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/13/2024	5 Full name of contributor Garza, Rudy6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$500.00
_	Daine in all a second	San Antonio, TX 78258	`	_	Frankrije (Ozakaziona)			
8	Admin	pation / Job title (See Instructions	5)	9	Employer (See Instructions HSCS			
	Date 12/04/2024	Full name of contributor HS Law PAC Contributor address; City; S				•	Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	·)		Employer (See Instructions	<u>:)</u>		
	i illicipai occu	pation 7 300 title (See Instructions	7)		Employer (See Instructions	"		
	Date 12/13/2024	Full name of contributor Hausenfluck, Amber Contributor address; City; S	out-of-state PAC (ID#:_ mate; Zip Code				Amount of Contribution (\$)	\$500.00
		Austin, TX 78704						
	Principal occu Lobbyist	pation / Job title (See Instructions	;)		Employer (See Instructions Self	5)		
	Date 12/11/2024	Full name of contributor Invenergy Investment Co. Contributor address; City; Si Chicago, IL 60606)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	<u>I</u> S)		
	Date 12/05/2024	Full name of contributor Jasik, Vianney Contributor address; City; S San Antonio, TX 78238	out-of-state PAC (ID#:_ mate; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Owner	pation / Job title (See Instructions	s)		Employer (See Instructions Leon Valley Storage	5)		
				1				

	MONET	ARY POLITICAL C	CONTRIBUTION	S		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this forr	n.	1	Total pages Schedule A1: Sch: 6/13 Rpt: 10/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/10/2024	5 Full name of contributor Kelley, Russell T. (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
		Austin, TX 78701					
8	Principal occu lobbyist	pation / Job title (See Instructions	9	Employer (See Instructions Blackridge	s)		
	Date 12/12/2024	Full name of contributor LaMantia , Lauren (Ms.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	Boerne, TX 78015 pation / Job title (See Instructions	2)	Employer (See Instructions	=)		
	Attorney	pation / Job title (See matrictions	"	Guerra Law Firm	"		
	Date 12/06/2024	Full name of contributor LaMantia Jr., Greg (Mr.) Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75244					
	Principal occu Self	pation / Job title (See Instructions	s) 	Employer (See Instructions L&F Distributing	5)		
	Date 12/04/2024	Full name of contributor Lloyd Gosselink Rochelle Contributor address; City; St Austin, TX 78701			•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		
	Date 12/13/2024	Full name of contributor Marquez, Enrique Contributor address; City; St Austin, TX 78735	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Consultant	pation / Job title (See Instructions	(3)	Employer (See Instructions Self Employed	s)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	NS 		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/13 Rpt: 11/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/11/2024	5 Full name of contributorMcGuire Woods Federal F6 Contributor address; City; St			7	Amount of Contribution (\$)	\$500.00
		Richmond, VA 23219-391					
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/28/2024	Full name of contributor Montez Felder, Debra Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$7.00
	Principal occu	San Antonio, TX 78253 pation / Job title (See Instructions	a I	Employer (See Instructions	<u>;)</u>		
	Not Employe		,	Not Employed	-,		
	Date 10/28/2024	Full name of contributor Montez Felder, Debra Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$7.00
		San Antonio, TX 78253					
	Principal occu Not Employe	pation / Job title (See Instructions ed	()	Employer (See Instructions Not Employed	5)		
	Date 12/13/2024	Full name of contributor Montford, John T. Contributor address; City; St San Antonio, TX 78257)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Attny/consul	pation / Job title (See Instructions tant)	Employer (See Instructions JTM Consulting LLC	5)		
	Date 12/04/2024	Full name of contributor Morin, Julie Contributor address; City; St Houston, TX 77005	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Owner	pation / Job title (See Instructions)	Employer (See Instructions Daily Court Review	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	Ν	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 8/13 Rpt: 12/48	
2	FILER NAME Martinez Fise	cher, Trey (The Honorable)				3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/14/2024	5 Full name of contributor NELSON, Jason6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$5,000.00
8	Principal occu	Sugar Land, TX 77479 pation / Job title (See Instructions	;) I	9	Employer (See Instructions	 		
-	Attorney	(,		Kickapoo Tribe	,		
	Date 12/01/2024	Full name of contributor ONCOR PAC Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$2,000.00
		Dallas, TX 75202-1234						
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	S)		
	Date 11/30/2024	Full name of contributor Olson, Lyndon Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$1,000.00
		Waco, TX 76710						
	Principal occu Not employe	pation / Job title (See Instructions d	5)		Employer (See Instructions Not employed	5)		
	Date 10/30/2024	Full name of contributor Olson, Lyndon Contributor address; City; S Waco, TX 76710)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Not employe	pation / Job title (See Instructions d	s)		Employer (See Instructions Not employed	5)		
	Date 12/04/2024	Full name of contributor Pharm PAC Contributor address; City; S Austin, TX 78757	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL (ONS		SCHEDULE A				
	The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 9/13 Rpt: 13/48			
2	FILER NAME Martinez Fise	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)		
4	Date 12/13/2024	5 Full name of contributor		7	Amount of Contribution (\$)	\$500.00			
8	Principal occu Executive	San Antonio, TX 78229 pation / Job title (See Instructions	s)	9 Employer (See Instructions SAWS	s)				
	Date 12/09/2024	Full name of contributor Red Rock Texas PAC Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$1,000.00		
	Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)								
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$2,500.00		
	•	San Antonio, TX 78212 pation / Job title (See Instructions	s)	Employer (See Instructions	<u> </u> S)				
	Date Full name of contributor out-of-state PAC (ID#:_ 12/12/2024 Rodriguez, Marc A. Contributor address; City; State; Zip Code Austin, TX 78701		Not Employed		Amount of Contribution (\$)	\$1,000.00			
	Principal occu Lobbyist	pation / Job title (See Instructions	;)	Employer (See Instructions Offices of Marc A. Rodr		ez			
	Date 12/12/2024					Amount of Contribution (\$)	\$5,000.00		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/13 Rpt: 14/48			
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)		3	Filer ID (Ethics Commission 00040542	on Filers)		
4	Date 12/11/2024	5 Full name of contributor out-of-state PAC (ID#:) 7		7	Amount of Contribution (\$)	\$500.00		
_	<u> </u>	Austin, TX 78701						
8	Principal occupation / Job title (See Instructions) 9 Employer (See Instruction		9 Employer (See Instructions)				
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ San Antonio Leaders for Uuniverstiy of Texas E Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$500.00			
	Principal occu	San Antonio, TX 78201 pation / Job title (See Instructions)	Employer (See Instructions)				
	Date Full name of contributor out-of-state PAC (ID#:) 12/13/2024 Sciano, Daniel Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00			
		San Antonio, TX 78216						
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions Tinsman & Sciano)				
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Sledgelaw Group PLLC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)				
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Southwestern Cattle Raisers Assoc. Contributor address; City; State; Zip Code Fort Worth, TX 76185)		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: 11/13 Rpt: 15/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)		3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/10/2024	 Full name of contributor	7	Amount of Contribution (\$)	\$1,000.00	
_	Dein sin al a sau	Austin, TX 78759	O Frankrije (Con lastwetier			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ TEXPAC Texas Medical Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	San Antonio, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ TREPAC 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	<u> </u>		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texans for Reasonable Solutions PAC Contributor address; City; State; Zip Code Austin, TX 78741			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/04/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Farm Bureau AG Fund Contributor address; City; State; Zip Code Waco, TX 76702			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1				
	The Instru	ction Guide explains how to complete th	nis for	rm.	1	Total pages Schedule A1: Sch: 12/13 Rpt: 16/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:) Texas Food & Fuel PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
_		Austin, TX 78701					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Date 12/04/2024	Full name of contributor out-of-state PAC Texas Homecare & Hospice PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00		
	Austin, TX 78759 Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Date 12/11/2024	Full name of contributor				Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/12/2024	Full name of contributor out-of-state PAC Texas Mortgage Bankers PAC Contributor address; City; State; Zip Code Austin, TX 78701	`)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/19/2024	Full name of contributor out-of-state PAC Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code Austin, TX 78701	(ID#:			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		

	MONET	ARY POLITICAL CONTRIBUT		SCHEDULE A1			
	The Instru	ction Guide explains how to complete th	is fo	rm.	1	Total pages Schedule A1: Sch: 13/13 Rpt: 17/48	
2	FILER NAME Martinez Fis	cher, Trey (The Honorable)			3	Filer ID (Ethics Commission 00040542	on Filers)
4	Date 12/13/2024	5 Full name of contributor out-of-state PAC (ID#:) Thomas, Becky 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5,000.00	
_	Deinsinal	San Antonio, TX 78216	- 10	Franksvar (Coo Instructions			
8	Assistant	pation / Job title (See Instructions)	9	Employer (See Instructions Gordon Hartman Ent.	·)		
	Date Full name of contributor x out-of-state PAC (ID#: C00274431) 11/13/2024 UnitedHealth Group PAC Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20004 pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/21/2024 Valero PAC Contributor address; City; State; Zip Code San Antonio, TX 78269					Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>(</u>		
	Date 12/12/2024	Full name of contributor out-of-state PAC (WholeSale Beer Distributors of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78701				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/19/2024 Williams, Glenn Contributor address; City; State; Zip Code San Antonio, TX 78217					Amount of Contribution (\$)	\$1,000.00
	Principal occu Nightclub Ov	pation / Job title (See Instructions) vner		Employer (See Instructions Self	5)		

PLED	GED CONTRIBUTI	ONS					SCHEDULE	В
The	Instruction Guide expla	1		Total pages Sched				
2 FILER NAM			3	3	Filer ID (Ethi	cs Commission Filers)		
	ischer, Trey (The Honorable)					00040542		
4 TOTAL C	F UNITEMIZED PLEDGE	S				\$		0.00
5 Date	6 Full name of pledgor	out-of-state PAC (ID#	:	8 ر		Amount of pledge (\$)	9 In-kind description (If applicable)	
	Texas AFT					\$5,000.00	(ii applicable)	
10/10/2004	7 Pledgor Address;	City; State; Zip Code				Ψ5,000.00		
12/13/2024								
	Auston, TX 78741				Г	Check if travel outs	i ide of Texas. Complete Scho	edule T
10 Principal oc	cupation / Job title (See Instruction	ons)	11 Employer (See Ins	truct	tion	_	de of rexas. Complete Son	- Cuulc 1
20 Timolpai oo		0110)	Linployer (See ins	sti uct	liUi	13)		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment		The Instruction Guide explains how to c	ompl	ete this form.			
1	Total pages Schedule F1:	2	FILER NAME		3	F	iler ID	(Ethics Commission Filers)
	Sch: 1/8 Rpt: 19/48		Martinez Fischer, Trey (The Honorable)			0	0040542	
4	Date	5	Payee name		•			
	11/20/2024		A1 Storage					
6	Amount (\$)	7	Payee address; City; State; Zip C	ode				
	\$1,342.00		1414 Gardina					
			San Antonio, TX 78201					
8	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outsing Check if Austin, TX,			
					Campaign Stora			сърснас
						Ŭ		
9	Complete ONLY if direct		Candidate/Officeholder name Office so	ught			Office he	eld
	expenditure to benefit C/O	Н						
	Date		Payee name					
	12/19/2024		Alamo Mailing Co.					
	Amount (\$)	T	Payee address; City; State; Zip C	ode				
	\$2,423.79		13114 Lookout Run					
			San Antonio, TX 78233					
	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Printing Expense		Check if travel outsin Check if Austin, TX,			
								or Constituent Christmas
					Card			
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught			Office he	eld
	expenditure to benefit C/O	Н						
	Date		Payee name					
	12/18/2024		Batson, Sarah					
	Amount (\$)	T	Payee address; City; State; Zip C	ode				
	\$50.00		827 W 12th St Apt 512					
			Austin, TX 78701					
	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE		Salaries/Wages/Contract Labor		Check if travel outside			
					Check if Austin, TX, Staff Bonus	, of	ficeholder living	expense
					Ciaii Dollas			
	Complete ONLY if direct	_	Candidate/Officeholder name Office so	<u>l</u> ught			Office he	eld
	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

	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: 2/8 Rpt: 20/48	Martinez Fischer, Trey (The Honorable) 00040542
4	Date	5 Payee name
	10/29/2024	Bexar County Tejano Democrats
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	9506 Wahada
		San Antonio, TX 78217
8	PURPOSE	
ľ	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
		Membership Dues
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialiture to benefit C/OI	<u> </u>
	Date	Payee name
	12/18/2024	Dixon, Kiera
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	309 Nick Price Cove
		Round Rock, TX 78664
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EX. ENDITORE	Check if Austin, TX, officeholder living expense Staff Bonus
		Stall bullus
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	
	Date 12/18/2024	Payee name Ehresman, Katya
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1408 E 34th St
		Austin, TX 78722
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Staff bonus
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/8 Rpt: 21/48	Martinez Fischer, Trey (The Honorable) 00040542
4	Date	5 Payee name
	12/18/2024	Escobedo, Jose
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	23910 W Interstate 10, Apt 11204
		San Antonio, TX 78257
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Staff Bonus
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2024	Golando, Martin (Mr.)
-	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	405 N. St. Mary's, Ste. 700
	Ψ230.00	400 N. St. Mary 3, Ste. 700
		San Antonio, TX 78205
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Staff Bonus
		Stan Bonds
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	v
	Date	Payee name
	10/28/2024	Jefferson Neighborhood Association
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	P.O. Box 28552
		San Antonio, TX 78228
	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
		Event Sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experiorare to belief C/Of	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

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	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: 4/8 Rpt: 22/48	Martinez Fischer, Trey (The Honorable) 00040542
4	Date	5 Payee name
	12/18/2024	Lopez, Diego
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$50.00	616 Canterbury Hill St
		San Antonio, TX 78209
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Staff Bonus
		Stan Bonds
Ļ	Commiste ONII V if diseast	Condidate/Office holder name Office county
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	· 	
	Date	Payee name
	12/19/2024	Martinez Fischer, Trey (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$518.75	2109 W. Mistletoe
		San Antonio, TX 78201
	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 Austin Travel not reimbursed by the State April, 2024
		Austin Haver not reimbarsed by the state April, 202-
	Complete ONLY if direct	Condidate/Officeholder name Office county Office hold
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/19/2024	Martinez Fischer, Trey (Mr.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$622.50	2109 W. Mistletoe
		San Antonio, TX 78201
	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.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
I		Austin Travel not reimbursed by the State May, 2024
L		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to beliefft C/O	•

SCHEDULE F1

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

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		mmittee	Legal Services	Expense	Salaries/W		e /Contract Labor		OTHER (enter a	a category not listed above)	
	Credit Card Payment			The Instruction G	uide explains h	ow to cor	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	(Ethics Commission Filers)
l	Sch: 5/8 Rpt: 23/48		Martinez Fi	scher, Trey (The	e Honorable))				00040542		
4	Date	5	Payee name									
l	12/19/2024		Martinez Fi	scher, Trey (Mr.)							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	de					
l	\$415.00		2109 W. Mi	stletoe								
l												
l			San Antonio	o, TX 78201								
8	PURPOSE	(a)		ee Categories listed at t		4.4-1	(b)	Description				
	OF	(")	Travel Out		ne top of this sche	dule)	(~)		outsio	de of Texas. Con	nplete Schedule T.	
l	EXPENDITURE			0. 2.001				Check if Austin,	, TX,	officeholder livin	g expense	
l									no	t reimburse	d by the State June,	
L								2024				
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	ceholder name	Of	ffice souç	ght			Office h	eld	
L	experioliture to beriefit C/Oi	1										
Г	Date		Payee name									
l	12/19/2024		Martinez Fi	scher, Trey (Mr.)							
Г	Amount (\$)		Payee addre	ss; City;	State;	Zip Cod	de					
l	\$415.00		2109 W. Mi	stletoe								
			San Antonio	o, TX 78201								
	PURPOSE	(a)	Category (S	ee Categories listed at t	he top of this sche	dule)	(b)	Description				
l	OF EXPENDITURE		Travel Out	of District				=			nplete Schedule T.	
l								_		officeholder livin	^{g expense} d by the State July, 20	24
l								Austin Havei	110	r remiburse	a by the State July, 20	,,,,
⊢	Complete ONLY if direct	<u> </u>	Candidate/Offi	ceholder name	Of	ffice soug	thr			Office h	eld	
l	expenditure to benefit C/OI		Januara on	ocholder hame	0.	moo oou	9			Cilioo II	Old .	
⊨	Date	ı	Davis a name									
l	12/19/2024		Payee name	scher, Trey (Mr.)							
┡		_				7:- 0	-1-					
l	Amount (\$) \$311.25		Payee addre 2109 W. Mi	, ,,	State;	Zip Coo	ue					
l	φ311.23		2109 VV. IVII	Siletoe								
l			Can Antoni	o, TX 78201								
┡	DUDDOOF	(-)					<i>(</i> 1)					
l	PURPOSE OF	(a) 		ee Categories listed at t	he top of this sche	dule)	(a)	Description Check if travel of	outsio	de of Texas, Con	nplete Schedule T.	
l	EXPENDITURE		Travel Out	UI DISTIICT				브		officeholder livin		
l									no	t reimburse	d by the State August	
								2024				
	Complete ONLY if direct		Candidate/Offi	ceholder name	Of	ffice souç	ght			Office h	eld	
	expenditure to benefit C/OI	Н										

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	T	
1	Total pages Schedule F1: Sch: 6/8 Rpt: 24/48	2 FILER NAME Martinez Fischer, Trey (The Honorable) 3 Filer ID (Ethics Commission Filers) 00040542
4	Date	5 Payee name
	11/05/2024	Mireles Foundation
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code329 Mary Louise

		San Antonio, TX 78201
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
		Event Sponsorship
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/08/2024	Pena, Yesenia (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$97.50	315 Parkside Dr.
		San Antonio, TX 78237
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Election Day staff support
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2024	Pena, Yesenia (Ms.)
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	315 Parkside Dr.
		San Antonio, TX 78237
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Staff Bonus
_	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	onponditure to benefit 0/01	

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)						
	Sch: 7/8 Rpt: 25/48	Martinez Fischer, Trey (The Honorable) 00040542						
4	Date	5 Payee name						
	12/18/2024	Poole, Scott						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$50.00	9118 Clearhurst Drive						
		Austin, TX 75238						
8	PURPOSE							
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Staff Bonus						
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						
	experionale to belief C/O							
	Date	Payee name						
	12/18/2024	Salinas, Claudia						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00	1414 Fulton Ave						
		San Antonio, TX 78201						
	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.						
	EXPENDITORE	Check if Austin, TX, officeholder living expense						
		Staff Bonus						
	Computate ONLY if dispost	Candidate/Officeholder some						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
L								
	Date	Payee name						
	12/18/2024	Salinas, Claudia						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$47.00	1414 Fulton Ave						
L		San Antonio, TX 78201						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.						
		Check if Austin, TX, officeholder living expense Office expense reimbursement						
		Cinico expense reimbursement						
_	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

	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: 8/8 Rpt: 26/48	Martinez Fischer, Trey (The Honorable) 00040542						
4	Date	5 Payee name						
	12/18/2024	Sison, Eos						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$100.00	5012 Duval St, Apt 207						
		Austin, TX 78751						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Staff bonus						
_								
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	'							
	Date	Payee name						
	11/05/2024	Toney, Tania (Ms.)						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$135.00	1111 Hidalgo						
		San Antonio, TX 78207						
	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						
		Election Day staff support						
		Liouisii Bay stail cappoit						
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI							
F	Date	Payee name						
	12/18/2024	Van Mannen, Cynthia						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$250.00	130 Cumberland Rd Apt 125						
	¥200.00	255 Camashala (147 pt 225						
		Austin, TX 78704						
	PURPOSE							
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.						
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
		Staff Bonus						
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
	experientale to beliefft G/OI	·						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instr	ruction Guide explains how	to complete this form.					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Comr	nission Filers)			
Sch: 1/21 Rpt: 27/48	Martinez Fischer, T	rey (The Honorable)		00040542				
4 CREDIT CARD ISSUER		ncial institution n Express	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDITORNO	\$				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
	\$101.23	10/27/2024	12/13/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State	e, Zip Code			
	Rose Cusine		8000 Coit Rd					
			Plano, TX 75025					
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
X Political	Food/Beverage Exper		Campaign lunch with Col	lleagues				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	C, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$2,500.00	(b) Date of Charge 10/28/2024	(c) Date(s) Credit Card Issue 12/13/2024 12/13/2024	er Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, State	e, Zip Code			
	Kristian Carranza C	Campaign	PO Box 831436					
			San Antonio, TX 78283					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodulo)	(b) Description					
X Political	Contributions/Donatio	ns Made By	Contribution					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	K, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$1,000.00	(b) Date of Charge 10/28/2024	(c) Date(s) Credit Card Issue 12/13/2024	er Paid				
PAYEE	(a) Payee name		(b) Payee address;	City, State	e, Zip Code			
	0		P.O. Box 1289					
	Cas Hernandez Ca	mpaign						
			Addison, TX 75001					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description					
l <u> </u>	Contributions/Donatio	,	Contribution					
X Political	Candidate/Officeholde							
Non-Political	\(\frac{1}{2} \)	of Texas. Complete Schedule T.		K, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held				

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1 Total pages So	chedule F4:	2 FILER NAME				3 Filer ID (Eth	ics Commiss	sion Filers)
Sch: 2/21 Rp	t: 28/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARI)		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6 PAYMENT		(a) Amount Charged \$17.07	(b) Date of Charge 10/29/2024	12/13/20		er Paid		
7 PAYEE		(a) Payee name Zoom			address; den Boulevard e, CA 95113	City,	State,	Zip Code
8 PURPOSE OF EXPENDITUR X Political		(a) Category (See Categories listed at the top Office Overhead/Reni		(b) Descri				
Non-Polit	ical	l	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living ex	pense	
9 Complete ONL expenditure to be		Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT		(a) Amount Charged \$45.11	(b) Date of Charge 10/29/2024	(c) Date(s 12/13/20) Credit Card Issue 124	er Paid		
PAYEE		(a) Payee name Amazon.com			address; y Avenue N WA 98109	City,	State,	Zip Code
PURPOSE OF EXPENDITUR		(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descri				
Non-Polit	ical	(c) Check if travel outside	of Texas. Complete Schedule T.	•	Check if Austin, TX	, officeholder living ex	pense	
Complete <u>ONL</u> expenditure to be		Candidate/Officeholder	name Office	e sought		Office held		
PAYMENT		(a) Amount Charged \$149.47	(b) Date of Charge 10/31/2024	(c) Date(s)) Credit Card Issue 124	er Paid		
PAYEE		(a) Payee name SIXT Car Rental		(b) Payee 9559 Air		City,	State,	Zip Code
PURPOSE OF EXPENDITUR X Political Non-Political	E	(a) Category (See Categories listed at the top Transportation Equipr Expense	ment And Related	(b) Descri Rental fo	r Election Day v		nonco	
		(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Cneck if Austin, TX	Office held	pense	
Complete ONL expenditure to be		Janadato/Onicencide	Office	- Jougill		Onice Helu		
I								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	cs Commis	sion Filers)
	Sch: 3/21 Rpt: 29/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$216.46	(b) Date of Charge 10/31/2024	(c) Date(s 12/13/20) Credit Card Issue)24	r Paid		
7	PAYEE	(a) Payee name Academy Sports			address; V Loop 410 onio, TX 78230	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descri		aign Event		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$407.24	(b) Date of Charge 11/01/2024	(c) Date(s 12/13/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name Amazon.com			address; y Avenue N WA 98109	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Description Election Day and Watch Party supplies				
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX	, officeholder living exp	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$153.50	(b) Date of Charge 11/01/2024	(c) Date(s 12/13/20) Credit Card Issue)24	r Paid		
	PAYEE	(a) Payee name Google			address; nphitheatre Parkv nview, CA 94043	,	State,	Zip Code
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Monthly	Service Fee G S			
\vdash	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	o cought	Check if Austin, TX	office hold	ense	
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
ı								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete th	nis form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 4/21 Rpt: 30/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPEND	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
	\$65.00	11/01/2024	12/13/2024				
7 PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code
	Authorize.Net		P.O. Box	8999			
				isco, CA 94128	-8999		
8 PURPOSE OF							
EXPENDITURE X Political	Office Overhead/Rent		Monthly S	ervice Fee Onlir	ne Fundraising		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid		
	\$909.26	11/01/2024	12/13/202	4			
PAYEE	PAYEE (a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Best Buy		6001 NW	Loop 410			
			San Antor	nio, TX 78238			
PURPOSE OF	(a) Category	of this cobodule)	(b) Descript				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		TV purchase for Capitol and District Offices				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	1 ' '	Credit Card Issuer	r Paid		
	\$17.28	11/02/2024	12/13/202	.4			
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
			1355 Mark	ket Square			
	Twitter						
			San Franc	isco, CA 94103			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	Monthly S	ervice Fee			
X Political	Office Overhead/Rental Expense						
Non-Political	cal (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX				officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to con	nplete thi	s form.			
1	Total pages Schedule F4:	2 FILER NAME					3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 5/21 Rpt: 31/48	Martinez Fischer, T	rey (The Honorable)				00040542		
4	CREDIT CARD ISSUER		ncial institution revious	E	XPEND	F UNITEMIZED TURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) [Date(s) C	redit Card Issuer	Paid		
		\$567.98	11/02/2024	12/13/2024					
7	PAYEE	(a) Payee name	•	(b) F	Payee ac	ldress;	City,	State,	Zip Code
		Hertz		955	59 Airpo	rt Blvd			
				Sar	n Antoni	o, TX 78216			
8	PURPOSE OF	(a) Category		1 ' '	Descripti				
	EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense	· ·	Rer	ntal for (Campaign Field	I and GOTV		
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Office	e soug	ght	_	Office held		
ex	kpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	1 ' '	. ,	redit Card Issuer	Paid		
		\$7,000.00	11/03/2024	12/	13/2024	1			
	PAYEE	(a) Payee name		(b) F	Payee ac	ldress;	City,	State,	Zip Code
		Laural Cuift Campa	ion	PO	Box 68	66			
		Laurel Swift Campa	ugn						
		(a) Oatawari				o, TX 78209			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Contribution					
	X Political	Contributions/Donatio		Coi	itiibutio	11			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e soug	ght		Office held		
ex	penditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	1 ' '	. ,	redit Card Issuer	Paid		
		\$220.19	11/03/2024	12/	13/2024	+			
	PAYEE	(a) Payee name		(b) F	Payee ac	ldress;	City,	State,	Zip Code
				533	35 Gate	Pkwy			
		Bluehost.com							
				Jac	ksonvill	e, FL 32256			
	PURPOSE OF	(a) Category		1 ` ′	Description				
	EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	We	bsite Ho	osting Fee			
	X Political								
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e soug	ght		Office held		
ex	kpenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense
Salaries/Wages/Contract Labor

	The Insti	ruction Guide explains how	to complete this form.		,		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commi	ssion Filers)		
Sch: 6/21 Rpt: 32/48		rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged \$221.88	12/13/2024		r Paid			
7 PAYEE	(a) Payee name		(b) Payee address;	City, State	Zip Code		
	BP Lighting & Soun	nd	7200 Polar Bear				
0 PURPOSE OF	(a) Catagony		San Antonio, TX 78238				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Stage Rental for Election	Night Watch Darty			
	Event Expense	,	Stage Refital for Election	Might Water Party			
X Political							
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.	—	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH			1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuel 12/13/2024	r Paid			
	\$63.95	11/06/2024	12/13/2024				
PAYEE	(a) Payee name	I	(b) Payee address;	City, State	Zip Code		
	HEB GAS		2118 Fredericksburg Rd				
			San Antonio, TX 78201				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE X Political	(See Categories listed at the top Transportation Equipr Expense		Fuel for Rental Vehicles				
Non-Political		of Texas. Complete Schedule T.	Check if Austin TX	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$33.16	(b) Date of Charge 11/09/2024	(c) Date(s) Credit Card Issuel 12/13/2024	r Paid			
PAYEE	(a) Payee name	l	(b) Payee address;	City, State	Zip Code		
			410 Terry Avenue N		•		
	Amazon.com		120 1011) / 1101120 11				
			Seattle, WA 98109				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Gifts for Campaign volunt	eers			
X Political	Gift/Awards/Memorial	s Expense					
Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.					
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 7/21 Rpt: 33/48	Martinez Fischer, T	rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$538.15	11/11/2024	12/13/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	JW Marriott		110 E. 2nd St				
	1, 2		Austin, TX 78701				
8 PURPOSE OF EXPENDITURE				alder events and machines			
X Political	Travel Out of District		Hotel Charges for Officer	older events and meetings			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$12.78	11/13/2024	12/13/2024				
PAYEE (a) Payee name			(b) Payee address;	City, State, Zip Code			
	DropBox		333 Brannan St.				
			San Francisco, CA 94107	7			
PURPOSE OF	(a) Category	of this cohodule)	(b) Description				
EXPENDITURE X Political	(See Categories listed at the top Office Overhead/Rent		Monthly Service Fee Cloud storage				
X Political Non-Political	() 🗖		<u> </u>				
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	officeholder living expense Office held			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Onc	e sought	Office field			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
TATIMENT			12/13/2024	. i did			
	\$234.43	11/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	(a) rayce name		302 Industrial Drive	State, 21p code			
	officesupply.com		ooz maasinai siivo				
			Columbus, WI 53925				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top	•	Campaign and Officehold	ler office supplies			
X Political	Office Overhead/Rent	tai Expense					
Non-Political	(c) Check if travel outside	Check if Austin, TX	, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instru	action Guide explains how	to complete th	is form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
Sch: 8/21 Rpt: 34/48	Martinez Fischer, Tr	ey (The Honorable)			00040542		
4 CREDIT CARD ISSUER	Name of finand see pre		EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged \$38.14	(b) Date of Charge 11/14/2024	(c) Date(s) (12/13/202	Credit Card Issuer 4	Paid		
7 PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
	Liberty Bar			h Alamo Street			
	(a) Catagoni			io, TX 78210			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o	f this schedule)	(b) Descripti	on ith Colleague			
X Political	Food/Beverage Expen	se	Wiccurig Wi	ur concagac			
Non-Political	(c) Check if travel outside of	f Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct	Candidate/Officeholder r	name Office	e sought		Office held		
expenditure to benefit C/OH		(1) 5 (0)	1/25//26				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer Paid 12/13/2024				
	\$535.14	11/18/2024	12,10,202				
PAYEE	(a) Layer name		(b) Payee a	ddress;	City,	State,	Zip Code
	JW Marriott		110 E. 2nd	l St			
			Austin, TX				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o	f this schedule)	(b) Descripti				
l <u> </u>	Travel Out of District		Hotel Charges for Capitol and Officeholder Meetings				
X Political			_	_			
Non-Political	(*) L	f Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder r	name Office	e sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) (Credit Card Issuer	Paid		
	\$1,500.00	11/19/2024	12/13/202				
	Ψ1,300.00	11/19/2024					
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code
			PO Box 12	2453			
	HDC						
			Austin, TX 78711				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top o	f this cohodulo)	(b) Descripti				
l <u> </u>	Contributions/Donation		Member D	ues			
X Political	Candidate/Officeholde	r/Political Committee					
Non-Political	(*) L	f Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder r	name Office	e sought		Office held		
expenditure to benefit C/OH							
I							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Etl	nics Commiss	sion Filers)		
	Sch: 9/21 Rpt: 35/48	Martinez Fischer, T	rey (The Honorable)			00040542				
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDI	\$				
6	PAYMENT	(a) Amount Charged \$82.24	(b) Date of Charge 11/01/2024	(c) Date(s 12/13/20) Credit Card Issu 124	er Paid				
7	PAYEE	(a) Payee name Hill Country Springs	5	(b) Payee 10019 S Austin .		City,	State,	Zip Code		
8	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	*	(b) Descri						
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living e	xpense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held				
е	expenditure to benefit C/OH		T	T						
	PAYMENT	(a) Amount Charged \$63.81	(b) Date of Charge 11/05/2024	(c) Date(s 12/13/20) Credit Card Issu 124	er Paid				
	PAYEE	(a) Payee name HEB GAS		(b) Payee address; 2118 Fredericksburg Rd		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Transportation Equipr Expense		(b) Descri	pnio, TX 78201 ption Rental Car					
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living ex	xpense			
е	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
	PAYMENT	(a) Amount Charged \$41.12	(b) Date of Charge 11/16/2024	(c) Date(s 12/13/20) Credit Card Issu)24	er Paid				
	PAYEE	(a) Payee name Adobe Systems, Ind	С	(b) Payee 345 Park San Jose		City,	State,	Zip Code		
	PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent	tal Expense	(b) Descri Monthly	Service Fee Gra					
	Non-Political	· · · · · · · · · · · · · · · · · · ·	of Texas. Complete Schedule T.		Check if Austin, T	X, officeholder living e	xpense			
e	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held				
1										

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Insti	ruction Guide explains how	to complete	this form.			
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Sch: 10/21 Rpt: 36/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES SED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$61.69	11/21/2024					
7	PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code
		Wix.com		P.O. Box	40190			
					cisco, CA 94140)		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip				
	X Political	Office Overhead/Rent		vvensile	nosting fee			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$100.00	11/21/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Apollo Artistry		1165 N. (Clark St., # 700			
				Chicago,	IL 60610			
	PURPOSE OF	(a) Category (See Categories listed at the top	of this schodule)	(b) Descrip				
	EXPENDITURE X Political	Office Overhead/Rent		Website	Hosting Fee			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
e	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$2,000.00	11/29/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Christian Manuel C	ampaign	3801 Tur	tlecreek Dr.			
				Port Arth	ur, TX 77642			
	PURPOSE OF	(a) Category		(b) Descrip				
	EXPENDITURE	(See Categories listed at the top Contributions/Donatio		Campaig	n contribution			
	X Political	Candidate/Officeholde						
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
e	xpenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 11/21 Rpt: 37/48	Martinez Fischer, T	rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$17.07	11/29/2024					
7 PAYEE	(a) Payee name Zoom	Zoom 55 Almaden Boulevard			e, Zip Code		
	San Jose, CA 95113						
8 PURPOSE OF EXPENDITURE	(a) Category	of this colored (Is)	(b) Description				
	(See Categories listed at the top of this schedule) Loan Repayment/Reimbursement Monthly Service Fee						
X Political							
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$153.50	12/01/2024					
PAYEE	PAYEE (a) Payee name (b) Payee address;			City, Stat	e, Zip Code		
	Google		1600 Amphitheatre Parkw	ray			
			Mountainview, CA 94043				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description G Suite Monthly Service Fee				
X Political	Office Overhead/Rent	tal Expense	,				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$17.28	(b) Date of Charge 12/02/2024	(c) Date(s) Credit Card Issuer	Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, Stat	e, Zip Code		
			1355 Market Square				
	Twitter						
			San Francisco, CA 94103				
PURPOSE OF	(a) Category	7 11. 1 1 1 1	(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	*	Monthly Service Fee Twitt	er			
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Et	3 Filer ID (Ethics Commission Filers)		
Sch: 12/21 Rpt: 38/48	Martinez Fischer, Trey (The Honorable)			00040542				
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	er Paid			
	\$750.00	12/02/2024						
7 PAYEE	(a) Payee name Aicha Davis Campa	Aicha Davis Campaign 608 Tara Dr.			City,	State,	Zip Code	
	() 0 :			TX 75115				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip					
l <u> </u>	Contributions/Donatio	ns Made By	Continu	uon				
X Political	H –	er/Political Committee						
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, of				expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Dato(s)) Credit Card Issue	or Doid			
PATMENT	\$45.00	12/02/2024	(c) Date(s)	Cleuit Caru Issue	ei Faiu			
PAYEE (a) Payee name (b) Payee address;		City,	State,	Zip Code				
	Authorize.Net		P.O. Box	8999				
			San Fran	ncisco, CA 94128	8-8999			
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Office Overhead/Rent		(b) Descrip Monthly	otion Service Fee onli	ne Fundraisin	g		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	l	Check if Austin, TX	(, officeholder living e	expense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	<u> </u>	Office held	•		
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	er Paid			
	\$1,500.00	12/02/2024						
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
	MALC		1108 Lav	/aca Street				
	MALC		Ste 110					
				ΓX 78701				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip					
l <u> </u>	Contributions/Donatio	ns Made By	Member	Dues				
X Political	-	er/Political Committee						
Non-Political	(*) —	of Texas. Complete Schedule T.		Check if Austin, TX	(, officeholder living e	expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
experiorale to belieff C/OH	<u> </u>							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete	this form.	(* ** ** ******************************		,
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 13/21 Rpt: 39/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$2,000.00	12/04/2024					
7	PAYEE	(a) Payee name (b) Payee address; PO Box 71738 El Paso, TX 79917		City,	State,	Zip Code		
Ļ	DUDDOCE OF	(a) Category						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	n Contribution			
	X Political	Contributions/Donatio		Campaig	jii Continbution			
	Non-Political	—	Candidate/Officeholder/Political Committee			-#6		
9	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, 1X,	Office held	ense	
	expenditure to benefit C/OH		That The Common	o oougiit		Cilioc ficia		
H	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$922.96	12/11/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Southwest Airlines		P.O. Box	36611			
L				Dallas, T	X 78235			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this echodula)	(b) Descrip				
	X Political	Travel Out of District	of this scriedule)	Travel for White House Christmas Party				
	Non-Political	(c) X Check if travel outside	of Texas. Complete Schedule T.		Chack if Austin TX	officeholder living expe	ansa	
⊢	Complete ONLY if direct	Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	e sought	Oricok ii Addani, 174,	Office held		
e	expenditure to benefit C/OH			-				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issue	r Paid		
		\$12.78	12/13/2024					
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		DropBox		333 Bran	ınan St.			
		Біорвох						
L	DUDDOCE OF	(a) Category		(b) Descri	ncisco, CA 94107			
	PURPOSE OF EXPENDITURE	(See Categories listed at the top	of this schedule)	1		ıd Storage		
	X Political	(See Categories listed at the top of this schedule) Office Overhead/Rental Expense Monthly Service Fee Cloud Storage						
	Non-Political	(c) Check if traval outside	of Texas. Complete Schedule T.		Chack if Austin TV	officeholder living expe	ansa	
\vdash	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	e sought	Crieck ii Austin, TX,	Office held	JIIOC	
e	expenditure to benefit C/OH		311100	9				
Н		1						

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commiss	sion Filers)	
Sch: 14/21 Rpt: 40/48	Martinez Fischer, T	rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$40.89	12/14/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Lyft 185 Berry Street, Suite 500		000				
		San Francisco, CA 94107					
8 PURPOSE OF							
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this scriedule)	Ride Share from Airport to	o Hotel			
X Political							
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,			, officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$39.66	12/14/2024					
PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code		
	Lyft 185 Berry Street, Suite 50		000				
			San Francisco, CA 94107	7			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Ride Share Hotel to White House				
X Political	Travor dat or Biotriot						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$146.90	12/14/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	l		600 13th Street				
	Mastros						
			Washington , DC 20005				
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
EXPENDITURE	Food/Beverage Exper	*	Dinner with colleagues				
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	<u> </u>	, officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

	The Instruction Guide explains how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 15/21 Rpt: 41/48	Martinez Fischer, T	rey (The Honorable)			00040542			
4 CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED IDITURES GED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer		Paid			
	\$366.06	12/16/2024						
7 PAYEE	(a) Payee name		(b) Payee		City,	State,	Zip Code	
	Salamander Hotel							
a puppose of	(a) Category (b) Description							
8 PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Hotel lodging for Washington			ton DC travel				
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, of			officeholder living exp	ense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	_	Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid			
	\$1,000.08	12/20/2024						
PAYEE (a) Payee name (b) Payee address;			City,	State,	Zip Code			
	University of Texas		110 Inne	r Campus Dr				
				ΓX 78712				
PURPOSE OF EXPENDITURE X Political	(a) Category (See Categories listed at the top Event Expense	of this schedule)	(b) Descrip	otion Ticket purchase				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin TX	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	encount ruceum, rx,	Office held			
expenditure to benefit C/OH			-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)) Credit Card Issuer	r Paid			
	\$15.33	12/12/2024						
PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code	
	Hill Country Springs	5	10019 S	IH35				
	Hill Country Springs	5						
	(a) Oatawari		Austin , 7					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip	ption Fee for Capitol W	later Service			
X Political	Office Overhead/Rent	tal Expense	I WIOTHING	i cc for capitor w	atti otivitt			
Non-Political	(a) Chook if traval autoida	of Toyas Complete Schoolide T		Chock if Assatin TV	officeholder living a	onco		
Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T. name Office	e sought	CHECK II AUSIIII, TX,	officeholder living exp	CIISE		
expenditure to benefit C/OH		Sillot	~ y · · ·		230314			
	I							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)					
Sch: 16/21 Rpt: 42/48	Martinez Fischer, T	rey (The Honorable)		00040542			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$41.12	12/16/2024					
7 PAYEE	(a) Payee name		(b) Payee address; City, State				
	Adobe Systems, Inc	С					
			San Jose, CA 95110-270	4			
8 PURPOSE OF EXPENDITURE	(a) Category (b) Description (See Categories listed at the top of this schedule) Monthly Service Fee Grant			ahia Danian			
X Political	1	Defice Overhead/Rental Expense Monthly Service Fee Graphic Defice Overhead/Rental Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	, officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Office sought				Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue 12/13/2024	er Paid			
	\$330.84	10/29/2024	12/13/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Myrons Steakhouse	е	10003 NW Military				
			San Antonio, TX 78231				
PURPOSE OF	(a) Category	of this sahadula)	(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Fundraising Dinner				
X Political							
Non-Political	`	of Texas. Complete Schedule T.		, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$538.41	11/04/2024	12/13/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	LIED		2118 Fredericksburg Rd.				
	HEB		San Antonio, TX 78201				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Event Expense	of this schedule)	•	s for campaign events and watch			
X Political	party						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
				·			

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)			
	Sch: 17/21 Rpt: 43/48	Martinez Fischer, T	rey (The Honorable)			00040542			
4	CREDIT CARD ISSUER		ncial institution revious	EXPE	OF UNITEMIZED NDITURES GED TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(:	s) Credit Card Issue	r Paid			
		\$245.18	10/29/2024	12/13/2	024				
7	PAYEE	(a) Payee name	•	(b) Paye	e address;	City,	State,	Zip Code	
		Mailchimp	405 N. Angier Ave						
					GA 30308				
8	PURPOSE OF EXPENDITURE	(a) Category (b) Description (See Categories listed at the top of this schedule) Monthly Service Fee Fmail			., .				
	X Political	Office Overhead/Rent							
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, of			officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
e:	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	` '	s) Credit Card Issue	r Paid			
		\$2,704.00	11/05/2024	12/13/2	024				
	PAYEE	(a) Payee name (b) Payee address;		City,	State,	Zip Code			
		La Gloria		100 Eas	t Grayson St.				
				San Ant	onio, TX 78215				
	PURPOSE OF	(a) Category (See Categories listed at the top	of this echodulo)	(b) Descr	•				
	EXPENDITURE	Food/Beverage Exper		Catering	for Election Nigh	t Party			
	X Political								
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
e:	xpenditure to benefit C/OH			T					
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(: 12/13/2	s) Credit Card Issuei	r Paid			
		\$120.44	11/05/2024	12/13/2	024				
H	PAYEE	(a) Payee name	l	(b) Paye	e address;	City,	State,	Zip Code	
				2118 Fr	edericksburg Rd.				
		HEB			_				
				San Ant	onio, TX 78201				
	PURPOSE OF	(a) Category		(b) Descr	iption				
	EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	•	Food, D	rinks and supplies	for Election N	ight Wato	ch Party	
	X Political	. 300, Botolago Expoi							
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held			
e	xpenditure to benefit C/OH								

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
	Sch: 18/21 Rpt: 44/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED TURES D TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$43.43	(b) Date of Charge 11/08/2024	(c) Date(s) C 12/13/2024	Credit Card Issuer 4	Paid		
		4.55						
7	PAYEE	(a) Payee name	•	(b) Payee address; City,			State,	Zip Code
		La Panaderia			dway			
L					o, TX 78209			
8	PURPOSE OF EXPENDITURE							
		Food/Beverage Expe		Meeting wi	th Colleague			
	X Political							
L				officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
Ľ	expenditure to benefit C/OH	() (T (1) = 1 (2)	1/12///				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer 1	Paid		
		\$120.66	11/15/2024	12/13/202-	*			
Г	PAYEE	(a) Payee name		(b) Payee address;			State,	Zip Code
		Carriqui		239 E. Gra	yson			
				San Antoni	io, TX 78215			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	· ·	(b) Description Meeting with Campaign Staff				
	X Political	Food/Beverage Expe	nse					
L	Non-Political	(1)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
F	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
		\$249.49	11/21/2024					
T	PAYEE	(a) Payee name	<u> </u>	(b) Payee ac	ldress;	City,	State,	Zip Code
		Libert Ber		1111 South	n Alamo Street			
		Liberty Bar						
L					o, TX 78210			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodulo)	(b) Description				
	X Political	Food/Beverage Expe	· ·	Lunch with	Campaign Sta	П		
	Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholde				officeholder living exp	ense	
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
6	expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

l	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethio	cs Commis	sion Filers)	
l	Sch: 19/21 Rpt: 45/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4	CREDIT CARD ISSUER		ncial institution revious	EXPEND	F UNITEMIZED ITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	Paid		
		\$250.00	11/29/2024					
7	PAYEE	(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code
		Starbucks	bucks 2202 Fredericksberg Rd					
L					io, TX 78201			
8	PURPOSE OF EXPENDITURE	(a) Category (b) Description (See Categories listed at the top of this schedule) Cift cards for staff and con-						
		Gift/Awards/Memorial		Gift cards i	for staff and cor	nstituents		
	X Political		·					
				officeholder living exp	ense			
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
-	expenditure to benefit C/OH	() (T (1) = 1 (1)	1// - ///				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
		\$245.18	11/29/2024					
	PAYEE	(a) Payee name	•	(b) Payee address;			State,	Zip Code
		Mailchimp		405 N. Ang	gier Ave			
				Atlanta, GA 30308				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Monthly Service Fee Email				
	X Political	Office Overhead/Rent	tal Expense					
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
€	expenditure to benefit C/OH		T	1				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	Credit Card Issuer	r Paid		
		\$227.95	12/10/2024					
	PAYEE	(a) Payee name	•	(b) Payee ad	ddress;	City,	State,	Zip Code
		Coop Hornon		411 E. Ce\	/allos			
		Casa Hernan						
L					io, TX 78204			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descripti				
	X Political	Food/Beverage Exper	*	Lunch with	Colleagues			
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	. Г	Check if Austin, TX,	officeholder living exp	ense	
Г	Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
E	expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Printing Expense Salaries/Wages/Contract Labor

	The Inst	ruction Guide explains how	to complete this	s form.			
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 20/21 Rpt: 46/48	Martinez Fischer, T	rey (The Honorable)			00040542		
4 CREDIT CARD ISSUER		ncial institution revious	EXPENDI	UNITEMIZED TURES TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
	\$264.07	12/12/2024					
7 PAYEE	(a) Payee name		(b) Payee ad	dress;	City,	State,	Zip Code
	Ruth Chris		107 W. 6th				
	() 0 :		Austin, TX				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Food/Beverage Expe		Dinner with Colleagues				
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, of			officeholder living expe	ense		
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH			1				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
	\$588.64	12/18/2024					
PAYEE	(a) Payee name	(b) Payee address;			City,	State,	Zip Code
	Carriqui		239 E. Gra	yson			
			San Antoni	o, TX 78215			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top		(b) Description Lunch with Campaign, Capitol and District Staff				
X Political	Food/Beverage Expe	nse					
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	Paid		
	\$575.00	11/05/2024					
PAYEE	(a) Payee name	ı	(b) Payee ad	dress;	City,	State,	Zip Code
	D15.1.		6528 Cand	lecrest Ct.			
	DJ Falco						
			San Antoni	o, TX 78244			
PURPOSE OF	(a) Category	-f.4b-i	(b) Description				
EXPENDITURE	(See Categories listed at the top Event Expense	or this schedule)	DJ for Elec	tion Night Party	/		
X Political							
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought		Office held		
expenditure to benefit C/OH							

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica	-	ices Sal ruction Guide explains how	-	THER (enter a category not listed above)			
4 7 1 0 1 1 54		ruction Guide explains now	to complete this form.	le en la cellina de minima en la cellina			
1 Total pages Schedule F4:		(The 11 control 12)		3 Filer ID (Ethics Commission Filers)			
Sch: 21/21 Rpt: 47/48		rey (The Honorable)	_	00040542			
4 CREDIT CARD ISSUER	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	 			
ISSUER	see pi	revious	CHARGED TO A CREDIT	I ·			
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$107.01	12/11/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	LIED		2118 Fredericksburg Rd.				
	HEB						
			San Antonio, TX 78201				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Snacks for Capitol and Dis	strict Office			
X Political	T God/Bovorago Expor						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$383.97	12/11/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			P.O. Box 36611				
	Southwest Airlines						
			Dallas, TX 78235				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Travel Out of District	of this schedule)	Travel for Meeting with Colleagues				
X Political	Traver out or District						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
	I						

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 48/48 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Martinez Fischer, Trey (The Honorable) 00040542 4 Name of Contributor / Corporation or Labor Organization / Pledgor /Payee Southwest Airlines 5 Contribution / Expenditure reported on: Schedule A2 Schedule B Schedule D Schedule F1 Schedule B(J) Schedule C2 Schedule F2 Schedule F4 Schedule G Schedule H Schedule COH-UC 6 Dates of Travel 7 Name of person(s) traveling Martinez Fischer, TMF Trey (Rep.) 8 Departure city or name of departure location 12/14/2024 San Antonio 9 Destination city or name of destination location 01/15/2025 Washington, DC 10 Means of transportation 11 Purpose of travel (including name of conference, seminar, or other event) Attend White House Christmas Party Commercial Airplane