

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

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|---|---|---|--|--|---|---------------------------------|--|----------------------------------|--|--|--|
| The JC/OH Instruction Guide explains how to complete this form. | | 1 Filer ID (Ethics Commission Filers) 00027138 | 2 Total pages filed: 65 | | | | | | | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | <table style="width: 100%;"> <tr> <td style="width: 30%;">MS / MRS / MR The Honorable</td> <td style="width: 30%;">FIRST Michael E.</td> <td style="width: 40%;">MI</td> </tr> </table> <hr/> <table style="width: 100%;"> <tr> <td style="width: 30%;">NICKNAME</td> <td style="width: 30%;">LAST Mery</td> <td style="width: 40%;">SUFFIX</td> </tr> </table> | | MS / MRS / MR The Honorable | FIRST Michael E. | MI | NICKNAME | LAST Mery | SUFFIX | OFFICE USE ONLY | | |
| | MS / MRS / MR The Honorable | FIRST Michael E. | MI | | | | | | | | |
| NICKNAME | LAST Mery | SUFFIX | | | | | | | | | |
| Date Received ELECTRONICALLY FILED 01/15/2026 | | | | | | | | | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div> | | Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged | | | | | | | | |
| | MS / MRS / MR Ms. | | FIRST Margaret G. | | | | | | | | |
| | NICKNAME | | SUFFIX | | | | | | | | |
| | LAST Mireles | | | | | | | | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="background-color: black; color: white; text-align: center; padding: 5px;"> REDACTED PER 254.0313, GOV'T CODE </div> | | | | | | | | | | |
| | AREA CODE PHONE NUMBER EXTENSION (210) 735-6348 | | | | | | | | | | |
| 8 REPORT TYPE | <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table> | | | <input checked="" type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | <input type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) |
| <input checked="" type="checkbox"/> January 15 | <input type="checkbox"/> 30th day before election | <input type="checkbox"/> Runoff | <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) | | | | | | | | |
| <input type="checkbox"/> July 15 | <input type="checkbox"/> 8th day before election | <input type="checkbox"/> Exceeded modified reporting limit | <input type="checkbox"/> Final Report (Attach C/OH-FR) | | | | | | | | |
| 9 PERIOD COVERED | Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025 | | | | | | | | | | |
| 10 ELECTION | ELECTION DATE Month Day Year 03/03/2025 | | ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | | | | | | |
| | OFFICE HELD (if any) District Judge District 144 Bexar | | 12 OFFICE SOUGHT (if known) | | | | | | | | |

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 65

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|--|---|
| 13 C / OH NAME Mery, Michael E. (The Honorable) | 14 Filer ID (Ethics Commission Filers) 00027138 |
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|---|--|---|------------|
| 15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages | This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures. | | |
| | COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC | COMMITTEE NAME | |
| | | COMMITTEE ADDRESS | |
| | | COMMITTEE CAMPAIGN TREASURER NAME | |
| | | COMMITTEE CAMPAIGN TREASURER ADDRESS | |
| 16 CONTRIBUTION TOTALS | 1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) | \$ | 50.00 |
| | 2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 100,906.94 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICAL EXPENDITURES | \$ | 36,060.72 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 73,697.11 |
| OUTSTANDING LOAN TOTALS | 6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ | 0.00 |

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

The Honorable Michael E. Mery

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

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| | | |
|--|---|---|
| 18 FILER NAME Mery, Michael E. (The Honorable) | | 19 Filer ID (Ethics Commission Filers) 00027138 |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) | \$ 95,750.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 5,156.94 |
| 3. | <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) | \$ |
| 4. | <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL) | \$ |
| 5. | <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ 35,698.19 |
| 6. | <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ |
| 7. | <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS | \$ |
| 8. | <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | \$ |
| 9. | <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 362.53 |
| 10. | <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH | \$ |
| 11. | <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS | \$ |
| 12. | <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER | \$ |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 1/32 Rpt: 4/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acevedo III, Alberto <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78217 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney at Law |
| 10 Contributor's employer/law firm Self employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Bruce <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Mimari Anderson Cilfone & Watkins PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bancroft, Anthony <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Law Office of Anthony Bancroft | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 2/32 Rpt: 5/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barkhurst, Paul <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm Barkhurst & Hinojosa, PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barrera Jr., Roy <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney at Law | | Contributor's Job Title Partner |
| Contributor's employer/law firm The Barrera Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bernal, Patrick <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Shareholder |
| Contributor's employer/law firm DNRBSZ | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 3/32 Rpt: 6/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bourgeois, Pauline | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78231 | |
| 8 Contributor's Principal Occupation Accountant | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Braubach, Robert P. | Amount of Contribution (\$) \$250.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78205 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/28/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, William | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78205 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 4/32 Rpt: 7/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Olga <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bruner, Larry <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78229 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Larry A. Bruner, PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brzozowski, Bart <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 5/32 Rpt: 8/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cabanas Law Firm PLLC <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78214 | 7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,500.00</div> |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/23/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calfas Law Group <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$2,500.00</div> |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canales , Jorge <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78204-1806 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$100.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Solo practitioner | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 6/32 Rpt: 9/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cevallos, Mark <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78201 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney at Law |
| 10 Contributor's employer/law firm Law Office of Mark A. Cevallos | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, David <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Cornelius (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 7/32 Rpt: 10/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 09/16/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Travis (Mr.) <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Real Estate Agent | | 9 Contributor's Job Title Real Estate Agent |
| 10 Contributor's employer/law firm Self employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crispin, Rodrigo <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201 | Amount of Contribution (\$) \$200.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self-employed. | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curl Stahl Geis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 8/32 Rpt: 11/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/17/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Jason 6 Contributor address; City; State; Zip Code San Antonio, TX 78204 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm Davis & Santos, PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deadman, Glenn Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Prado, Mario Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Del Prado Law | | Law firm of contributor's spouse (if any) State District Judge Bexar County |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 9/32 Rpt: 12/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/10/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Diaz, Reynaldo <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | 7 Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div> |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Owner |
| 10 Contributor's employer/law firm Reynaldo Diaz Accident Injury Attorney PC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/31/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillard, Deborah <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78213 | Amount of Contribution (\$) <div style="text-align: right;">\$100.00</div> |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duarte, Demetrio <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201 | Amount of Contribution (\$) <div style="text-align: right;">\$750.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Partner |
| Contributor's employer/law firm Duarte & Molina PC | | Law firm of contributor's spouse (if any) Duarte & Molina PC |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 10/32 Rpt: 13/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fahle, John <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78204 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney at Law |
| 10 Contributor's employer/law firm Lawchampions | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferro, Joseph <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Dentist | | Contributor's Job Title Dentist |
| Contributor's employer/law firm Ferro Family Cosmetic Dentistry | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford Murray PLLC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 11/32 Rpt: 14/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/08/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gamez, Joe A. (Mr.) <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | 7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div> |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Owner |
| 10 Contributor's employer/law firm Gamez Law Firm | | 11 Law firm of contributor's spouse (if any) Gamez Law Firm |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |

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| Date 10/14/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Raymond (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78283-1061 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div> |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

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| Date 11/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Patrick <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78253 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$250.00</div> |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 12/32 Rpt: 15/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 11/05/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glick, Daniel E. <hr/> 6 Contributor address; City; State; Zip Code El Mirage, AZ 85335 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Retired | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/05/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glick, Edwina <hr/> Contributor address; City; State; Zip Code El Mirage, AZ 85335 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldstein & Orr PLLC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 13/32 Rpt: 16/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Brian Lorenzo <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78201 | 7 Amount of Contribution (\$) \$200.00 |
| 8 Contributor's Principal Occupation Reseller/Flipper | | 9 Contributor's Job Title Owner |
| 10 Contributor's employer/law firm Self | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra LLP <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Monica <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed. | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 14/32 Rpt: 17/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haase, Alexis <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Contributor's Principal Occupation Pathology Assistant | | 9 Contributor's Job Title Pathology Assistant |
| 10 Contributor's employer/law firm University Hospital | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haase, Ken <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230 | Amount of Contribution (\$) \$100.00 |
| Contributor's Principal Occupation Retired | | Contributor's Job Title Retired |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hayek III, Anton Paul <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78220 | Amount of Contribution (\$) \$300.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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SCHEDULE A(J)1

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 16/32 Rpt: 19/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karam, Edward <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Real Estate Broker | | 9 Contributor's Job Title Real Estate Broker |
| 10 Contributor's employer/law firm Self employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karam, Natalie <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Wayne Wright, LLP | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karam, Richard <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78229 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 17/32 Rpt: 20/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/21/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karl, Chris | 7 Amount of Contribution (\$) \$1,000.00 |
| | 6 Contributor address; City; State; Zip Code San Antonio, TX 78230 | |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm Valdez & Trevino | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/24/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaHood Norton Law Group | Amount of Contribution (\$) \$2,500.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78216 | |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaHood, Adam | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code San Antonio, TX 78212 | |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 18/32 Rpt: 21/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/23/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langley & Banack Incorporated <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 12/04/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Edmond D. Karam <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$150.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of George Scharmen <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78204 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 19/32 Rpt: 22/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/25/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of J. Charles Bunk <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78205 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Ron D. Ross <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78255 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/25/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Shawn C. Brown, P.C. <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 20/32 Rpt: 23/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 09/19/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Pat Maloney, P.C. <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78205 | 7 Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div> |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke, Shannon <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232 | Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm The Locke Law Group | | Law firm of contributor's spouse (if any) The Locke Law Group |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maloney, Janice <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Law Office of Janice Maloney | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 21/32 Rpt: 24/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/10/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Raymond <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78223 | 7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div> |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self employed | | 11 Law firm of contributor's spouse (if any) Retired |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McRae, Leland <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$750.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mery, Bruce <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78229 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$500.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self Employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 22/32 Rpt: 25/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/15/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mery, George <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Business owner. | | 9 Contributor's Job Title Owner |
| 10 Contributor's employer/law firm Elegant Limousine & Charter | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 07/09/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mery, Marina <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$50.00 |
| Contributor's Principal Occupation Psychologist | | Contributor's Job Title Consultant |
| Contributor's employer/law firm SKS Consulting Firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/06/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mery, Ross <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78257 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Real estate construction | | Contributor's Job Title Builder |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 23/32 Rpt: 26/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mireles, Margaret (Ms.) 6 Contributor address; City; State; Zip Code REDACTED PER 254.0313, GOV'T CODE | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Teacher | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naman, Howell, Smith & Lee, PLLC Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oliva, Saks, Garcia & Curiel, PLLC Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 24/32 Rpt: 27/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/17/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prichard, David <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm Prichard Oliver Montpas | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos & Del Cueto <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78210 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 09/19/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramos, Rolando (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78210 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation Attorney at Law | | Contributor's Job Title Partner |
| Contributor's employer/law firm Ramos & Del Cueto, P.L.L.C. | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 25/32 Rpt: 28/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/27/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riklin, Rand <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78212 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Partner |
| 10 Contributor's employer/law firm Goode Casseb Riklin Choate & Watson | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/16/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ritchie, Derek <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$2,500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Partner |
| Contributor's employer/law firm Law Office of Derek S. Ritchie | | Law firm of contributor's spouse (if any) Law Office of Derek S. Ritchie |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/18/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Saenz, Paul (Dr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Sports doctor. | | Contributor's Job Title Retired. |
| Contributor's employer/law firm Retired | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 26/32 Rpt: 29/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) San Antonio Professional Firefighters Association PAC <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78201 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serna, Cesar (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Partner |
| Contributor's employer/law firm Serna & Serna PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Serna Jr., Baltazar (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Partner |
| Contributor's employer/law firm Serna & Serna PLLC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 27/32 Rpt: 30/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheridan, Brigid <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/21/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson & Gold <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78257 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stenberg, F.J. <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78212 | Amount of Contribution (\$) \$150.00 |
| Contributor's Principal Occupation Attorney at Law | | Contributor's Job Title Attorney at Law |
| Contributor's employer/law firm Solo practitioner | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 28/32 Rpt: 31/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stevens, Mark <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78250 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suris, Orlando (Dr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230 | Amount of Contribution (\$) \$250.00 |
| Contributor's Principal Occupation Physician | | Contributor's Job Title Physician |
| Contributor's employer/law firm Heights OBGyn | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 11/17/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tawil, Fred <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78257 | Amount of Contribution (\$) \$5,000.00 |
| Contributor's Principal Occupation Software design. | | Contributor's Job Title Owner |
| Contributor's employer/law firm Swipe Track Solutions | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 29/32 Rpt: 32/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Paul <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Self Employed | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/15/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Crosley Law Firm, PC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78218 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Law Office of David A. Garcia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217 | Amount of Contribution (\$) \$1,000.00 |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 30/32 Rpt: 33/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Law Office of M'Liss Christian <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78205 | 7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div> |
| 8 Contributor's Principal Occupation | | 9 Contributor's Job Title |
| 10 Contributor's employer/law firm | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |

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|---|---|--|
| Date 10/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Law Offices of John Kuntz <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$1,000.00</div> |
| Contributor's Principal Occupation | | Contributor's Job Title |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

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|---|--|--|
| Date 10/10/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tinsman & Sciano <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216 | Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$5,000.00</div> |
| Contributor's Principal Occupation | | Contributor's Job Title Partner |
| Contributor's employer/law firm | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 31/32 Rpt: 34/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdespino, Edward <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216 | 7 Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div> |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Attorney |
| 10 Contributor's employer/law firm Naman, Howell, Smith & Lee, PLLC | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/13/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdez, Robert E. (Mr.) <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230 | Amount of Contribution (\$) <div style="text-align: right;">\$2,500.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Partner |
| Contributor's employer/law firm Valdez and Trevino Attorneys at Law PC | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woods, Byran <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209 | Amount of Contribution (\$) <div style="text-align: right;">\$1,000.00</div> |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Solo practitioner | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A(J)1: Sch: 32/32 Rpt: 35/65 |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/17/2025 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Eugenia <hr/> 6 Contributor address; City; State; Zip Code Marfa, TX 79843 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Contributor's Principal Occupation Attorney | | 9 Contributor's Job Title Retired |
| 10 Contributor's employer/law firm Retired | | 11 Law firm of contributor's spouse (if any) |
| 12 If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, John P <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78270 | Amount of Contribution (\$) \$500.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamora, Anthony <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78201 | Amount of Contribution (\$) \$300.00 |
| Contributor's Principal Occupation Attorney | | Contributor's Job Title Attorney |
| Contributor's employer/law firm Self employed | | Law firm of contributor's spouse (if any) |
| If contributor is a child, law firm of parent(s) (if any) | | |
| | | |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|---|------------------------------------|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 36/65 | |
| 2 FILER NAME Mery, Michael E. (The Honorable) | | 3 Filer ID (Ethics Commission Filers) 00027138 | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 10/20/2025 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Javier | 8 Amount of contribution (\$) \$2,578.47 | 9 In-kind contribution description |
| | 7 Contributor address; City; State; Zip Code San Antonio, TX 78207 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) Attorney | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) Partner | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) The Herrera Law Firm | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |
| Date 10/20/2025 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herrera, Jorge | Amount of contribution (\$) \$2,578.47 | In-kind contribution description |
| | Contributor address; City; State; Zip Code San Antonio, TX 78207 | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | Employer (FOR NON-JUDICIAL) (See instructions) | |
| Contributor's principal occupation (FOR JUDICIAL) Attorney | | Contributor's job title (FOR JUDICIAL) (See instructions) Partner | |
| Contributor's employer/law firm (FOR JUDICIAL) The Herrera Law Firm | | Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) | | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 1/25 Rpt: 37/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/14/2025 | 5 Payee name Alamo Mailing | |
| 6 Amount (\$) \$1,932.77 | 7 Payee address; City; State; Zip Code 13114 Lookout Run San Antonio, TX 78233 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Postage for invitations for October 20, 2025 fundraiser. | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage for invitations for October 20, 2025 fundraiser. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/06/2025 | Payee name Ameri-Form, Inc. | |
| Amount (\$) \$541.00 | Payee address; City; State; Zip Code 8666 Heubner Rd. Ste. 104 San Antonio, TX 78240 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expense for tote bags to hand out to supporters. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/14/2025 | Payee name Anedot | |
| Amount (\$) \$20.30 | Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 2/25 Rpt: 38/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 12/04/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$4.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/18/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Anedot | | |
| Amount (\$) \$200.30 | Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/12/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Anedot | | |
| Amount (\$) \$10.30 | Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 3/25 Rpt: 39/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 11/08/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$40.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/02/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Anedot | | |
| Amount (\$) \$24.60 | Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 10/29/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Anedot | | |
| Amount (\$) \$50.60 | Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

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|---|--|--|
| 1 Total pages Schedule F1: Sch: 4/25 Rpt: 40/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/23/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$165.30 | 7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 10/19/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$210.60 | Payee name Anedot Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 10/15/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$40.30 | Payee name Anedot Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 5/25 Rpt: 41/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/11/2025 | 5 Payee name Anedot | |
| 6 Amount (\$) \$300.60 | 7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fees. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/09/2025 | Payee name Anedot | |
| Amount (\$) \$0.34 | Payee address; City; State; Zip Code 1340 Poydras Street New Orleans, LA 70112 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Transaction fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/19/2025 | Payee name Bexar County Democratic Party | |
| Amount (\$) \$2,500.00 | Payee address; City; State; Zip Code 1844 Fredericksberg San Antonio, TX 78201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Democratic Primary filing fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 6/25 Rpt: 42/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 08/06/2025 | 5 Payee name Bexar County SD 19 Tejano Democrats | |
| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code 574 Kendalia San Antonio, TX 78221 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table rental at Petition Signing party. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/24/2025 | Payee name Bexar County SD 19 Tejano Democrats | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code 574 Kendalia San Antonio, TX 78221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Annual Christmas Party. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/22/2025 | Payee name Bexar County Young Democrats | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 1844 Fredericksburg Road San Antonio, TX 78701 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Trunk or Treat Sponsorship. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 7/25 Rpt: 43/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/20/2025 | 5 Payee name FedEx | |
| 6 Amount (\$) \$74.69 | 7 Payee address; City; State; Zip Code 1275 NE Loop 410 San Antonio, TX 78209 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsor board for fundraiser. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/14/2025 | Payee name H.E.B. | |
| Amount (\$) \$71.91 | Payee address; City; State; Zip Code 7951 Giulbeau San Antonio, TX 78250 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Bag fillers for a birthday party. | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bag fillers for a birthday party. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/09/2025 | Payee name H.E.B. | |
| Amount (\$) \$25.92 | Payee address; City; State; Zip Code 7951 Giulbeau San Antonio, TX 78250 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fillers for snack bags. | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fillers for snack bags. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 8/25 Rpt: 44/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 12/21/2025 | 5 Payee name JVC Media, LLC | |
| 6 Amount (\$) \$7,090.38 | 7 Payee address; City; State; Zip Code 6856 Alamo Downs Parkway San Antonio, TX 78247 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of campaign signs. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/21/2025 | Candidate/Officeholder name Jaramillo, Leonard | Office sought Office held |
| Amount (\$) \$7,500.00 | Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE San Antonio, TX 78221 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Installs campaign signs throughout Bexar County. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/09/2025 | Candidate/Officeholder name Judge Andy Mireles Charitable Foundation | Office sought Office held |
| Amount (\$) \$200.00 | Payee address; City; State; Zip Code 329 Mary Louise Dr. San Antonio, TX 78201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Family Feud fundraiser. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 9/25 Rpt: 45/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/25/2025 | 5 Payee name Lulac Council #4290 | |
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code 346 Senora Drive San Antonio, TX 78216 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bar b que plates. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/20/2025 | Payee name Lulac Council #4629 | |
| Amount (\$) \$50.00 | Payee address; City; State; Zip Code 2806 Fredericksburg Road San Antonio, TX 78201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas party. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/19/2025 | Payee name Lulac Council 4483 | |
| Amount (\$) \$50.00 | Payee address; City; State; Zip Code 2806 Fredericksburg Rd Ste. 103 San Antonio, TX 78201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sausage wrap fundraiser. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 10/25 Rpt: 46/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 12/20/2025 | 5 Payee name Lulac District 15 | |
| 6 Amount (\$) \$50.00 | 7 Payee address; City; State; Zip Code PO Box 831 San Antonio, TX 78293 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Christmas party. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/22/2025 | Payee name Madonna Center | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code 1906 Castroville Road San Antonio, TX 78237 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets for the 2025 Gala. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/13/2025 | Payee name Mexican American Bar Association of San Antonio | |
| Amount (\$) \$300.00 | Payee address; City; State; Zip Code P.O. Box 830953 San Antonio, TX 78283 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual Pachanga. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 11/25 Rpt: 47/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 07/12/2025 | 5 Payee name Northeast Bexar County Democrats | |
| 6 Amount (\$) \$40.00 | 7 Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Membership dues. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/12/2025 | Payee name Northeast Bexar County Democrats | |
| Amount (\$) \$10.00 | Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for meeting expenses. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/12/2025 | Payee name Northeast Bexar County Democrats | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bronze Sponsorship for Labor Day Picnic. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 12/25 Rpt: 48/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 09/13/2025 | 5 Payee name Northeast Bexar County Democrats | |
| 6 Amount (\$) \$10.00 | 7 Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for meeting expenses. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/15/2025 | Payee name Northeast Bexar County Democrats | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Display table at the Labor Day picnic fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/11/2025 | Payee name Northeast Bexar County Democrats | |
| Amount (\$) \$15.00 | Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for meeting expenses. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 13/25 Rpt: 49/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 12/13/2025 | 5 Payee name Northeast Bexar County Democrats | |
| 6 Amount (\$) \$10.00 | 7 Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for meeting expenses. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/08/2025 | Payee name Northeast Bexar County Democrats | |
| Amount (\$) \$10.00 | Payee address; City; State; Zip Code P.O. Box 700766 San Antonio, TX 78270 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution for meeting expenses. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/19/2025 | Payee name Northwest Democrats | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fee for signatures for Program book for Pat Maloney Dinner 2025. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 14/25 Rpt: 50/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 08/16/2025 | 5 Payee name Northwest Democrats | |
| 6 Amount (\$) \$10.00 | 7 Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast meeting. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 10/18/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Northwest Democrats | | |
| Amount (\$) \$20.00 | Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast meeting. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 07/19/2025 | Candidate/Officeholder name Office sought Office held | |
| Payee name Northwest Democrats | | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad in the program book for the Pat Maloney Dinner in August of 2025. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 15/25 Rpt: 51/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 07/19/2025 | 5 Payee name Northwest Democrats | |
| 6 Amount (\$) \$120.00 | 7 Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets for the Pat Maloney Dinner. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/19/2025 | Payee name Northwest Democrats | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Breakfast meeting. | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast meeting. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/20/2025 | Payee name Northwest Democrats | |
| Amount (\$) \$20.00 | Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast meeting. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 16/25 Rpt: 52/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 11/15/2025 | 5 Payee name Northwest Democrats | |
| 6 Amount (\$) \$30.00 | 7 Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thanksgiving food drive. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/15/2025 | Payee name Northwest Democrats | |
| Amount (\$) \$20.00 | Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast meeting. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/19/2025 | Payee name Northwest Democrats | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code P.O. Box 681911 San Antonio, TX 78268 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast meeting. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule F1: Sch: 17/25 Rpt: 53/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 07/13/2025 | 5 Payee name Office Depot | |
| 6 Amount (\$) \$21.97 | 7 Payee address; City; State; Zip Code 255 E. Basse Rd. Suite 1510 San Antonio, TX 78260 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expense for making copies of petition forms. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/16/2025 | Payee name Office Depot | |
| Amount (\$) \$17.28 | Payee address; City; State; Zip Code 255 E. Basse Rd. Suite 1510 San Antonio, TX 78260 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you cards. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/30/2025 | Payee name Office Depot | |
| Amount (\$) \$12.96 | Payee address; City; State; Zip Code 255 E. Basse Rd. Suite 1510 San Antonio, TX 78260 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Thank you cards. | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Thank you cards. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 18/25 Rpt: 54/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 08/23/2025 | 5 Payee name Prestige Printing | |
| 6 Amount (\$) \$891.98 | 7 Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78216 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of pushcards. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/06/2025 | Payee name Prestige Printing | |
| Amount (\$) \$806.46 | Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78216 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of the invitation for the October 20, 2025 fundraiser. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 11/02/2025 | Payee name Prestige Printing | |
| Amount (\$) \$722.03 | Payee address; City; State; Zip Code 8 Burwood Lane San Antonio, TX 78216 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Printing Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing for the October 20, 2025 fundraiser invitations. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 19/25 Rpt: 55/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/22/2025 | 5 Payee name Pruden, Nkenge | |
| 6 Amount (\$) \$320.00 | 7 Payee address; City; State; Zip Code 1423 Creek Knoll San Antonio, TX 78253 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets for the 37th Annual Poinsettia Ball. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/26/2025 | Payee name San Antonio AFL-CIO | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code 9502 Computer Dr. Ste. 201 San Antonio, TX 78229 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Event Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Tickets for "A Night of Union Power" Gala. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/25/2025 | Payee name San Antonio Bar Association | |
| Amount (\$) \$75.00 | Payee address; City; State; Zip Code 126 Nueva 3rd Floor San Antonio, TX 78204 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues for 2025-2026. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 20/25 Rpt: 56/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 12/04/2025 | 5 Payee name San Antonio Black Lawyer's Association | |
| 6 Amount (\$) \$150.00 | 7 Payee address; City; State; Zip Code P.O. Box 831202 San Antonio, TX 78283 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas Soiree. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/21/2025 | Payee name San Antonio Branch of the NAACP | |
| Amount (\$) \$150.00 | Payee address; City; State; Zip Code P.O. Box 200225 San Antonio, TX 78220-0225 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad in the Program Book for the 75th Diamond Jubilee Freedom Fund Dinner. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/29/2025 | Payee name St. Mary's University Athletics | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code One Camino Santa Maria San Antonio, TX 78228 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Buddy Meyer Golf tournament. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 21/25 Rpt: 57/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 09/03/2025 | 5 Payee name State Bar of Texas-Judicial Section | |
| 6 Amount (\$) \$60.00 | 7 Payee address; City; State; Zip Code 1414 Colorado Austin, TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Section Dues June 1 2024-May 31, 2026. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 10/10/2025 | Payee name State Tejano Democrats Convention | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code 909 Theresa Avenue Austin , TX 78703 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bronze Sponsorship. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/03/2025 | Payee name Texas Association of District Judges, c/o Rabeea Collier | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 201 Caroline 10th Floor Houston, TX 77019 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues for the Texas Association of District Judges. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 22/25 Rpt: 58/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 09/03/2025 | 5 Payee name Texas Center for the Judiciary | |
| 6 Amount (\$) \$120.00 | 7 Payee address; City; State; Zip Code 1210 San Antonio Suite 800 Austin , TX 78701 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to the Texas Center for the Judiciary. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/17/2025 | Payee name The Heights on Huebner | |
| Amount (\$) \$50.00 | Payee address; City; State; Zip Code 10127 Huebner San Antonio, TX 78240 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas party. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/29/2025 | Payee name The San Antonio AFL-CIO Central Labor Council | |
| Amount (\$) \$250.00 | Payee address; City; State; Zip Code 9502 Computer #201 San Antonio, TX 78229 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital ad for "A Night of Union Power" Gala. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|---|
| 1 Total pages Schedule F1: Sch: 23/25 Rpt: 59/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/28/2025 | 5 Payee name U.S. Postal Service | |
| 6 Amount (\$) \$78.00 | 7 Payee address; City; State; Zip Code 6825 Heubner Road San Antonio, TX 78238 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Roll of stamps. | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Roll of stamps. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/17/2025 | Payee name United States Postal Service | |
| Amount (\$) \$188.00 | Payee address; City; State; Zip Code 6825 Heubner San Antonio, TX 78238 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post office box rental fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/23/2025 | Payee name VIVA Politics | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code Viva Politics 1850 Fredericksburg San Antonio, TX 78201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fees. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 24/25 Rpt: 60/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 09/25/2025 | 5 Payee name VIVA Politics | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code Viva Politics 1850 Fredericksburg San Antonio, TX 78201 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/31/2025 | Payee name VIVA Politics | |
| Amount (\$) \$2,500.00 | Payee address; City; State; Zip Code Viva Politics 1850 Fredericksburg San Antonio, TX 78201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 12/07/2025 | Payee name VIVA Politics | |
| Amount (\$) \$2,000.00 | Payee address; City; State; Zip Code Viva Politics 1850 Fredericksburg San Antonio, TX 78201 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 25/25 Rpt: 61/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/28/2025 | 5 Payee name VIVA Politics | |
| 6 Amount (\$) \$1,000.00 | 7 Payee address; City; State; Zip Code Viva Politics 1850 Fredericksburg San Antonio, TX 78201 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Consulting Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting fee. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/18/2025 | Payee name William Sessions Inn of Court | |
| Amount (\$) \$375.00 | Payee address; City; State; Zip Code 200 Concord Plaza, Suite 425 San Antonio, TX 78216 | |
| PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Fees | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Dues for 2025-2026. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|---|--|
| 1 Total pages Schedule G: Sch: 1/4 Rpt: 62/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 07/12/2025 | 5 Payee name Exxon | |
| 6 Amount (\$) \$20.00 <input checked="checked" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 9445 Bandera Road San Antonio, TX 78250 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 08/23/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$20.00 <input checked="checked" type="checkbox"/> Reimbursement from political contributions intended | Payee name Exxon Payee address; City; State; Zip Code 9445 Bandera Road San Antonio, TX 78250 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 09/15/2025 | Candidate/Officeholder name Office sought Office held | |
| Amount (\$) \$20.00 <input checked="checked" type="checkbox"/> Reimbursement from political contributions intended | Payee name Exxon Payee address; City; State; Zip Code 9445 Bandera Road San Antonio, TX 78250 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule G: Sch: 2/4 Rpt: 63/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 10/10/2025 | 5 Payee name Exxon | |
| 6 Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 9445 Bandera Road San Antonio, TX 78250 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 11/12/2025 | Candidate/Officeholder name Exxon | |
| Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 9445 Bandera Road San Antonio, TX 78250 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/08/2025 | Candidate/Officeholder name Exxon | |
| Amount (\$) \$20.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 9445 Bandera Road San Antonio, TX 78250 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gasoline. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|--|
| 1 Total pages Schedule G: Sch: 3/4 Rpt: 64/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 07/21/2025 | 5 Payee name GoDaddy | |
| 6 Amount (\$) \$22.19 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 155 E. GoDaddy Way Tempe, AZ 85284 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Information services. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 08/29/2025 | Payee name GoDaddy | |
| Amount (\$) \$22.19 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 155 E. GoDaddy Way Tempe, AZ 85284 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Information services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 09/15/2025 | Payee name GoDaddy | |
| Amount (\$) \$102.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 155 E. GoDaddy Way Tempe, AZ 85284 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Information services. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|--|---|
| 1 Total pages Schedule G: Sch: 4/4 Rpt: 65/65 | 2 FILER NAME Mery, Michael E. (The Honorable) | 3 Filer ID (Ethics Commission Filers) 00027138 |
| 4 Date 11/26/2025 | 5 Payee name Mailchimp | |
| 6 Amount (\$) \$47.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | 7 Payee address; City; State; Zip Code 675 Ponce De Leon Atlanta, GA 30308 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital goods. |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 12/26/2025 | Payee name Mailchimp | |
| Amount (\$) \$47.97 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | Payee address; City; State; Zip Code 675 Ponce De Leon Atlanta, GA 30308 | |
| PURPOSE OF EXPENDITURE | Category (See Categories listed at the top of this schedule) Advertising Expense | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Digital goods. |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Candidate/Officeholder name | | |
| Office sought | | |
| Office held | | |