1		CEHOLDER CEREPORT	8			ORM C/OH HEET PG 1
The C/OH Instruction (Guide explains how	to complete this form.	1 Filer ID (Ethic	cs Commission Filers)	2 Total pages fi	led:
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR M R	FIRST John		T	OFFICE	USEONLY
IVAIVIE	NICKNAME	Perez		SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX	: APT/SUITE#;	thouston T			
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (713)	PHONE NUMBER	- 018	nsion 2	Date Hand-delivered	or Date Postmarked
6 CAMPAIGN TREASURER	MS/MRS/MR MR	FIRST		MI	Receipt #	Amount \$
NAME	NICKNAME	Schwertn		SUFFIX	Date Processed Date Imaged	
7 CAMPAIGN	STREET ADDRESS	(NO PO BOX PLEASE); APT /		TY;	STATE:	ZIP CODE
TREASURER ADDRESS (Residence or Business)	_	ingstide Ln.		ouston	TX	77079
8 CAMPAIGN TREASURER PHONE	AREA CODE (281)	PHONE NUMBER	2125	NSION		
9 REPORT TYPE	January 15 July 15	30th day before	election E	Runoff Exceeded Modified Reporting Limit	treasurer a (Officeholds	
10 PERIOD	Month	Day Year		Month	Day Year	Γ
COVERED	01	/ 19 / 2022	THROUGH	03 /	/28 / 20	22
11 ELECTION	ELECTION DA Month Day	Year Primar	y Runoff	ELECTION TYPE Other Description		
	05/07	2011 Genera	al Special	Description		
12 OFFICE	OFFICE HELD (if any)			SE SOUGHT (if known	Trustee Pa	uition 6
14 NOTICE FROM POLITICAL COMMITTEE(S)	I THE CHINDIDATE / OFFI	CE OF POLITICAL CONTRIBUTION CEHOLDER. THESE EXPENDITUR S AND OFFICEHOLDERS ARE REQ	RES MAY HAVE REEN MAD	OF WITHOUT THE CONF	ソカルナビで ハタ ハミミハミリハト	DEDIC VNOWS EDOE OF
00000000	COMMITTEE TYPE	COMMITTEE NAME				
Additional Pages	GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TE	REASURER NAME			
		COMMITTEE CAMPAIGN T	REASURER ADDRESS		DEC	EIVEN
		GO TO	PAGE 2		APF	6 2022 J
Forms provided by Texas E	thics Commission	www.eth	ics.state.tx.us		BY: No	Revised 8/17/2020

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

		
15 C/OH NAME	John Travis Perez 16	Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 13, 243
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 31,024.79
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D OF REPORTING PERIOD	s 13,281.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,050.00
	wear, or affirm, under penalty of perjury, that the accompanying report is true ar uired to be reported by me under Title 15, Election Code.	nd correct and includes all information
		•
		parameter of the second of the
	Singator of Condition	
	Signature of Candi	date or Officeholder
		-
NOTARY PURPLE OF THE PERPLE	Please complete either option below: MARY 7, 2024	
(1) Affidavit		
NOTARY STAMP/SEA	- I	
Sworn to and subscribed	before me by John Travis Perez this the	a day of April,
20 22 , to certify	which, witness my hand and seal of office.	t
Diane Dic	kens Diane Dickens	notary public
Signature of officer administe	ring oath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaration	on	
My name is	, and my date of birth is	
		e) (zip code) (country)
Evecuted in	()	
Lvecnied III	County, State of , on the day of(month)	, ∠u (year)
	Signature of Candidate	e/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	John Travis Perez 20 Filer ID (Ethi	cs Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 12,433,00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 810.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	SCHEDULE E: LOANS	\$ 5,050.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4,201,24
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 4,895.87
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 10,469.95
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 11, 457.73
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C	/он \$ 🔑
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

SCHEDULE A1

The	Instruction Guide explains how to complete this for	n. 1 Total pages Schedule A1:	9
FILER NAME	John Travis Perez	3 Filer ID (Ethics Commission	on Filers)
Date) בנעג	5 Full name of contributor out-of-state PAC (ID#) Cindy McClain 6 Contributor address; City; S 4445 Mc Farlin Boulevard Pall	ate; Zip Code	(\$)
Principal occuj	pation / Job title (See Instructions) 9	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID#: Bean Ryan Contributor address; City; S 13627 Comely Lane Houston	Amount of contribution tate; Zip Code Toxal	(\$)
	ation / Job title (See Instructions)	77079 Employer (See Instructions)	
7/06/2022	Full name of contributor out-of-state PAC (ID# Katie Camarillo Contributor address; City; S 12458 Kimberly Ln Howston	ate; Zip Code	(\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)	
Date	Full name of contributor out-of-state PAC (ID# Heidi Holcomb) Contributor address; City; S 13727 Alchester Lune Houston	tate; Zip Code	(\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)	
	ATTACH ADDITIONAL COPIES OF 1		

SCHEDULE A1

The	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
FILER NAME		9
	John Travis Perez	3 Filer ID (Ethics Commission Filers
Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
2-19.2022	Tye Justice	
£.,	6 Contributor address; City; State: Zin Code	\$50,00
	6 Contributor address; City; State; Zip Code 15 Stone gate Or Houston TX 77024	3 1 100
Principal occu	upation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor	American formation
12-19-2022	ashley Zahn	Amount of contribution (\$)
,	Contributor address; City; State; Zip Code	\$500.00
	8511 Cedarbiuke Or Houston TX 77055	, 2 00.00
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ions)
Date	Full name of contributor	Amount of a still it is a
2-24-2022	Valerie Manis	Amount of contribution (\$)
	Valerie Manis Contributor address; City; State; Zip Code 8335 Ginger Oakstreet Houston TX 77055	50.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruct	ions)
Date	Full name of contributor	Amount of contribution (\$)
7-77-3097	Diane Chong Contributor address; City; State; Zip Code	Amount of contribution (\$)
1-2-0-	Contributor address; City; State; Zip Code	ALLO
	13155 Rummel Creek Rd Howston Tx 77079	100.00
Principal occup	ation / Job title (See Instructions) Employer (See Instructi	ons)

SCHEDULE A1

Date Principal occupation / Job Principal occupation / Job Principal occupation / Job Principal occupation / Job Full na Contrib 23 1	Longwood, Lane Howston title (See Instructions) me of contributor	State; Zip Code TX 77024 9 Employer (See Instruct AC (ID#:) State; Zip Code	3 Filer ID (Ethics Commission Filers 7 Amount of contribution (\$) \$\pm\$250.00 tions) Amount of contribution (\$)
O2-25-2022 Sa G Contribution / Job Se Principal occupation / Job S	rbara Peterson Dutor address; City; Longwood, Lane Howton title (See Instructions) The of contributor out-of-state PA How Salo Salo Sutor address; City; Faust Lane Houston	State; Zip Code TX 77024 9 Employer (See Instruct AC (ID#:) State; Zip Code	\$250.00
Date Principal occupation / Job Full na Contrib 23 1 Principal occupation / Job to	Longwood, Lane Howton title (See Instructions) me of contributor	TX 77024 9 Employer (See Instruct AC (ID#:) State; Zip Code	Amount of contribution (\$)
Date Full na Contrib 23 1 Principal occupation / Job to	me of contributor out-of-state PA H hew Salo outor address; City; Faust Lane Houston	AC (ID#:) State; Zip Code	Amount of contribution (\$)
Contribution / Job to Date	tthew Salo utor address; City; Faust Lane Houston	State; Zip Code	
Principal occupation / Job to	rutor address; City; Faust Lane Houston	State; Zip Code TX 77024	\$ 100,00
Principal occupation / Job t			
Date Full nar	we (eee manualions)	Employer (See Instructi	ons)
/)	ne of contributor U out-of-state PAG	C (ID#:)	Amount of contribution (\$)
Contrib	utor address; City; 7 Boheme Drive Housto	State; Zip Code on TX 77024	100.00
Principal occupation / Job t	tle (See Instructions)	Employer (See Instructi	ons)
1 .	ne of contributor	C (ID#:)	Amount of contribution (\$)
Contribu	ator address; City; 7 Comely Lane Houston	State; Zip Code Tx 77079	\$ 100.00
Principal occupation / Job ti	tle (See Instructions)	Employer (See Instruction	ons)

SCHEDULE A1

The	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	John Travis Perez	3 Filer ID (Ethics Commission Filers
4 Date		7 Amount of contribution (\$)
	6 Contributor address; City; State; Zip Code 702 West Forest Or Howston TX 77079	A 100
Principal occu	upation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
3-04-0	Contributor address; City; State; Zip Code 14106 Barry Knoll Ln Houston TX 77079	\$ 100.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)
	Contributor address; City; State; Zip Code 827 Thornvine Ln Howston Tx 77079	\$ 50.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruct	ilons)
Date	Full name of contributor Out-of-state PAC (ID#:) John Schell	Amount of contribution (\$)
)}-09-2022	Contributor address; City; State; Zip Code 13430 anber Queen Howston TX 77041 Lane	\$ 100.00
Principal occup	pation / Job title (See Instructions) Employer (See Instructions)	ions)
	I.	
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NE	

SCHEDULE A1

The	Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Q
2 FILER NAME	John Travis Perez		3 Filer ID (Ethics Commission Filers)
4 Date 03-10-2042	5 Full name of contributor out-of-state PAC (IE Emily Sperandio 6 Contributor address; City; 706 Camelof Lane Howston	State; Zip Code	7 Amount of contribution (\$)
8 Principal occu	pation / Job title (See Instructions) 9	Employer (See Instructi	ons)
03-10-3073	Comballandania	State: Zin Code	Amount of contribution (\$) # 500,00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
Date () - () - 2023	Full name of contributor out-of-state PAC (ID) Lin ley Dieringer Contributor address; City; s 13726 AppleTree Houston	State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
03-10-2032 Date	Contributor address	State; Zip Code	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ns)
	ATTACH ADDITIONAL CODITO OT		
	ATTACH ADDITIONAL COPIES OF T If contributor is out-of-state PAC, please see Instruction	on guide for additional rep	EDED porting requirements.

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 9
2 FILER NAME	John Travis Perez	3 Filer ID (Ethics Commission Filers)
	5 Full name of contributor out-of-state PAC (ID#:) Sheri Stegent 6 Contributor address; City; State; Zip Code 13718 Kimberley lane Houston TX 77079	7 Amount of contribution (\$)
b Findipal occu	pation / Job title (See Instructions) 9 Employer (See Instru	ctions)
03-27-302×	Full name of contributor out-of-state PAC (ID#:) Catterine Sullivan Contributor address; City; State; Zip Code	Amount of contribution (\$)
	13315 Perthshire Houston TX 77079	700.00
Principal occup	ation / Job title (See Instructions) Employer (See Instru	ctions)
03.23-20 ³²	Full name of contributor out-of-state PAC (ID#:) Joann Basham Contributor address; City; State; Zip Code 10306 Long munt Dr Howston TX 77042	Amount of contribution (\$) A 25.00
Principal occup	pation / Job title (See Instructions) Employer (See Instru	ctions)
Date	Full name of contributor	
0) 21 200	Contributor address; City; State; Zip Code 12203 Broken Dough Prive Houston TX 77024	A 200.00
Principal occup	eation / Job title (See Instructions) Employer (See Instru	ctions)
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS If contributor is out-of-state PAC, please see Instruction guide for additional	

SCHEDULE A1

The	Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: 9
FILER NAME		3 Filer ID (Ethics Commission Filers)
l Date		
	5 Full name of contributor Out-of-state PAC (ID#:) Tonathan Burrett	7 Amount of contribution (\$)
3-71-80	6 Contributor address; City; State; Zip Code 1811 Bering Prive 400 Houston Tx 77057	\$ 308.00
Principal occu	ination / Joh title /One Install	
	9 Employer (See Instructions)	ctions)
Date	Full name of contributor	Amount of contribution (\$)
7-78-2027	Terence Townend	in the second se
3 2 4 5 5 5	Contributor address; City; State; Zip Code 21 In vernell Parkway Howton TX 77055	H 100.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date	Full name of contributor	Amount of contribution (\$)
1-18-2022	John Wall are	L
3	Contributor address; City; State; Zip Code 6763 Woodway Howston TX 77057 Swite 100	A 150.00
Principal occup	pation / Job title (See Instructions) Employer (See Instruc	tions)
Date	Full name of contributor	Amount of goodshuit (6)
7-04-503-9	Page Schwertner	Amount of contribution (\$)
4.0	Contributor address; City; State; Zip Code 13930 Kings ride Ln Hourton TX 77079	\$ 500.00
	ation / Job title (See Instructions) Employer (See Instruc	tions)

SCHEDULE A1

The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1:
2 FILER NAME	John Travis Pere	.7.	3 Filer ID (Ethics Commission Filers)
4 Date 01-04-103-1	Oy-2022 6 Contributor address; City: State; Zip Code 13930 Kings ride Ln Houston TX 77079		7 Amount of contribution (\$)
o Frincipal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date 03-01-203よ	Jennifer Hyland	State; Zip Code +0 1 7 77079	Amount of contribution (\$)
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	G (ID#:)	Amount of contribution (\$)
03-01-7077	Clay Cox Contributor address; City; 135 11 Kinberlay Houston	State; Zip Code	\$ 1,000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	Full name of contributor	(ID#:)	Amount of contribution (\$)
07-11-509-5	Larry Wuebbels Contributor address; City; 1392) Taylor crest Rd Houston	State; Zip Code TX 77079- 5716	\$ 100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruction	ons)
	ATTACH ADDITIONAL COPIES O	OF THIS SCHEDULE AS NE	EEDED eporting requirements.

SCHEDULE A1

		page in the	
The	Instruction Guide explains how to complete this	form.	1 Total pages Schedule A1: 9
2 FILER NAME	John Travis Pe	rez	3 Filer ID (Ethics Commission Filers)
4 Date 03-11-2022	Heidi Holcomb 6 Contributor address; City; 137 27 Alchesterlane Houst	State; Zip Code	7 Amount of contribution (\$)
8 Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructi	ions)
Date	Anne Hachtman	(ID#:)	Amount of contribution (\$)
	Contributor address; City; 13006 Conifer Rd Hounton	State; Zip Code	45,000.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructi	ons)
Date	1 Rieko	(ID#:)	Amount of contribution (\$)
01-16-200-	Contributor address; City; 51 Westmister Pr Houston	State; Zip Code	100.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
Date	Full name of contributor	: (ID#:)	Amount of contribution (\$)
	Contributor address; City;	State; Zip Code	
Principal occup	ation / Job title (See Instructions)	Employer (See Instruct	ions)
	ATTACH ADDITIONAL COPIES (If contributor is out-of-state PAC, please see Instr		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	ne Instruction Guide explains how to complete this for	n,	1 Total pages Sched	lule A2: 3	
2 FILER NAM	John Travis Perez		3 Filer ID (Ethics Co	ommission Filers)	
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRII	BUTIONS	\$	7	
	7 Contributor address; City; State; Zip Code Food + Prink 1300 Confer Rd Houston Tx 77079-730 Check if travel outside of Texas. Complete State Check if travel outside of Texas. Complete Check if travel outside of Texas. Complete Check if trave				
14 Contributor's	employer/law firm (FOR JUDICIAL)			DICIAL) (See Instructions) se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date	Full name of contributor out-of-state PAC (ID#:	Zip Code	H 37 , 40	In-kind contribution description (an paign event Food + Drink	
Principal occu	pation / Job title (FOR NON-JUDICIAL) (See Instructions)	Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL)(See Instructions)			
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JU	DICIAL)(See Instructions)	
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm	of contributor's spous	se (if any) (FOR JUDICIAL)	
If contributor i	s a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
If	ATTACH ADDITIONAL COPIES OF The contributor is out-of-state PAC, please see instruction	IIS SCHEDUI	E AS NEEDED		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

Th	e Instruction Guide explains how to complete this forn	n.	1 Total pages Schedule A2:		
2 FILER NAME	John Travis Perez		3 Filer ID (Ethics Col	mmission Filers)	
4 TOTAL OF	F UNITEMIZED IN-KIND POLITICAL CONTRIE	BUTIONS	\$ 4	_	
5 Date D 3 · 0 9 · 2 6 2 2	7 Contributor address; City; State; Zip Code 13511 Kimberley Howston Tx 77079			9 In-kind contribution description Campaign Event food + Orin K de of Texas. Complete Schedule T. AL)(See Instructions)	
	upation / Job title (FOR NON-JUDICIAL)(See Instructions) principal occupation (FOR JUDICIAL)			DICIAL) (See Instructions)	
	employer/law firm (FOR JUDICIAL)			se (if any) (FOR JUDICIAL)	
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date Full name of contributor out-of-state PAC (ID#:					
Principal occ	upation / Job title (FOR NON-JUDICIAL) (See Instructions)	T	er (FOR NON-JUDICI/		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See Instructions)			
Contributor's	employer/law firm (FOR JUDICIAL)	Law firr	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor	r is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	4.			
	ATTACH ADDITIONAL COPIES OF I f contributor is out-of-state PAC, please see Instruct			g requirements.	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

	menuc	e triis page	in the report.		
T	he Instruction Guide explains how to complete this for	m,	1 Total pages Schedule A2:		
2 FILER NAM	John Travis Perez	***************************************	3 Filer ID (Ethics Commission Filers)		
4 TOTAL O	F UNITEMIZED IN-KIND POLITICAL CONTRI	BUTIONS	\$ 0		
	6 Full name of contributor □ out-of-state PAC (ID#: Mark Eubank) 7 Contributor address; City; State; 13918 Saint Mary's Lane Houston TX	Zip Code 77079	8 Amount of Sinkind contribution description (ampaign Event Foolt Dink, Check if travel outside of Texas. Complete Schedule T.		
10 Principal occ	supation / Job title (FOR NON-JUDICIAL)(See Instructions)	11 Employe	er (FOR NON-JUDICIÁL)(See Instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contribu	utor's job title (FOR JUDICIAL)(See Instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm	n of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 0 }-09 - ユッシッ	Contributor address; City; State;	Zip Code 77079	Amount of Contribution \$ In-kind contribution description \$ 135.00 Camponign Frent Foods Drink Check if travel outside of Texas. Complete Schedule T.		
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See Instructions)		r (FOR NON-JUDICIAL)(See Instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contribu	tor's job title (FOR JUDICIAL) (See Instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	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)				
if	ATTACH ADDITIONAL COPIES OF TI f contributor is out-of-state PAC, please see Instruction	HIS SCHEDU	LE AS NEEDED additional reporting requirements.		

LOANS

SCHEDULE E

If the requested	If the requested information is not applicable, DO NOT include this page in the report.					
The	Instruction Guide explains how to compl	1 Total pages Schedule E:				
2 FILER NAME $\overline{J}_{\mathfrak{c}}$	sha Travis Perez		3 Filer ID (Ethics Commission Filers)			
4 TOTAL OF UN	IITEMIZED LOANS		\$ —			
5 Date of loan	7 Name of lender ut-of-state l	PAC (ID#:)	9 Loan Amount (\$)			
01-19-2022	John Travis Perez		\$ 5,000.00			
6 Is lender a financial Institution?	8 Lender address; City;	State; Zip Code	10 Interest rate			
Y N	13815 Taylorcrest House Road	ton Texas 77079	11 Maturity date			
12 Principal occupation	on / Job title (See Instructions)	13 Employer (See Instructions)				
14 Description of Colla	ateral	Check if personal fun account (See Instruct	ds were deposited into political tions)			
16 GUARANTOR INFORMATION	17 Name of guarantor		19 Amount Guaranteed (\$)			
	18 Guarantor address; City;	State; Zip Code				
not applicable						
20 Principal Occupat	ion (See Instructions)	21 Employer (See Instructions)				
Date of loan	Name of lender	PAC (ID#:)	Loan Amount (\$)			
01-51-5055	John Travis Perez		\$50,00			
Is lender a financial	Lender address; City;	State; Zip Code	Interest rate			
Institution?	13815 Taylorcrest Housto	1 Texas 77079	Maturity date			
Principal occupation	on / Job title (See Instructions)	Employer (See Instructions)				
Description of Collateral		Check if personal funds were deposited into political account (See Instructions)				
GUARANTOR INFORMATION	Name of guarantor		Amount Guaranteed (\$)			
	Guarantor address; City;	State; Zip Code				
not applicable						
Principal Occupati	ion (See Instructions)	Employer (See Instructions)				
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.						

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.	(3101 & 34.1091	,
1 Total pages Schedule F1:	2 FILER NAME John Travis Perez		3 Filer ID (Ethic	s Commission Filers)
4 Date 0}- よろ-2022	5 Payee name Harland Clarke			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$ 47.16	15957 La Cantera Parkway	Sanantonio	TX	78256
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description	-1, 11	
PURPOSE OF EXPENDITURE	office Overhead/Rental Expense	checks		
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living	g expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name I	Office sought		Office held
Date	Payee name			
07-12-7097	Mammoth Marketing 6	roup		
Amount (\$)	Payee address;	City;	State;	Zip Code
1,500.00	4500 Bissonnet Street Suite	370 Della	ire TX	77401
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Website	Developm	ent
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder livin	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
01-21-2027	Sprint 2 Print			
Amount (\$)	Payee address;	City;	State;	Zip Code
£2,458.36	8748 Clay Rd Ste. 300	Houston	Tx	77080
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Signs		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder livin	g expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate / Officeholder name H	Office sought		Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

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

Credit Card Payment	Committee Legal Services Salaries/N The Instruction Guide explains how to c	/ages/ContractLabor	Other (enter a category not listed above)	
1 Total pages Schedule F1:	2 FILER NAME John Travis Perez		3 Filer ID (Ethics Commission Filers	s)
4 Date 1-21-22 through 03-24-22	5 Payee name Anedot Inc.			
6 Amount (\$)	7 Payee address;	City;	State; Zip Code	
\$ 195.72	1340 Poydras Street Suite 1770	New Orleans	LA 70112	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Accounting / Banking	Service	Fees	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	i
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
Amount (\$)	Payee address;	City;	State; Zip Code	
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE				
OF EXPENDITURE				
	Check if travel outside of Texas, Complete Schedule T.	Check if Austin	n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	***************************************
Date	Payee name			
Amount (\$)	Payee address;	City;	State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held	-
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEE	EDED	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

	EXPENDITURE CATEGORIES F	OR BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political	Fees Office Over Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Ex	pense /ages/Contract Labor	Solicitation/Fundraisin Transportation Equipm Travel In District Travel Out Of District Other (enter a categor	ent & Related Expense
1 Total pages Schedule F2:	2 FILER NAME John Truis Perez		3 Filer ID (Ethics C	ommission Filers)
4 TOTAL OF UNITEM	IIZED UNPAID INCURRED OBLIGATION	S	\$	
5 Date 02-01-2032	6 Payee name Coobo Media			
7 Amount (\$)	8 Payee address;	City;	State;	Zip Code
4912.80	9525 Katy Freeway Suite 230	Housto	. Tx	77024
9 TYPE OF EXPENDITURE	Political Non-Po	litical		
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Orinting Expense (c) Check if travel outside of Texas. Complete Schedule T.	P	+'S.gnJ	expense
11 Complete ONLY if direct expenditure to benefit C/Oh		Office sought	Office h	eld
03-01-2012	Payee name Coobo Media			
Amount (\$)	Payee address;	City;	State;	Zip Code
* 879,45	9525 Katy Freeway Suite 210	Howston	TX	77024
TYPE OF EXPENDITURE	Political Non-P	olitical		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expenses	Description Logo a	nd Card Pe	sign
	Check if travel outside of Texas. Complete Schedule T.	Check if	Austin, TX, officeholder livi	ng expense
Complete <u>QNLY</u> if direct expenditure to benefit C/C		Office sought	Office I	neld
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS N	EEDED	

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

	EXPENDITURE CATEGORIES FOR	BOX 10(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political	Fees Office Overhead Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense		Solicitation/Fundraisir Transportation Equipr Travel In District Travel Out Of District Other (enter a catego	nent & Related Expense
	The Instruction Guide explains how to comp	lete this form.		
Total pages Schedule F2:	2 FILERNAME John Travis Perez		3 Filer ID (Ethics C	Commission Filers)
TOTAL OF UNITEM	IZED UNPAID INCURRED OBLIGATIONS		\$ 0	
5 Date 0)-2]-2022	6 Payee name ORR STrategy Group			!
7 Amount (\$) 2,500.00	8 Payee address; 1707 /2 Post Oak Blud # 407	City; Howst	State;	Zip Code 77 0 56
9 TYPE OF EXPENDITURE	Political Non-Politica	al		
10	(a) Category (See Categories listed at the top of this schedule)	b) Description		
PURPOSE OF EXPENDITURE	Consulting Expense	Campai	an Service	.)
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Au	stin, TX, officeholder living	g expense
11 Complete ONLY if direct expenditure to benefit C/Oh Date O 3 - 25-20 2-2	Canada Company	ce sought		
Amount (\$)	Payee address;	City;	State;	Zip Code
\$ 500.00	1347 Lanonte Ln	Houst	on TX	77018
TYPE OF EXPENDITURE	Political Non-Politi	ical		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Advertising Expense	Web	site Consu	lting
	Check if travel outside of Texas. Complete Schedule T.	Check if	Austin, TX, officeholder li	ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Odificación y Cintorio	ice sought	Office	e held
	ATTACH ADDITIONAL COPIES OF THIS SO	CHEDULE AS I	NEEDED	
				D 1 0/47/200

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

	EXPENDITURE CATEGORIES FOR BOX 10(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made By Candidate/Officeholder/Political	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Printing Expense Gift/Awards/Memorials Expense Printing 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 F2:	2 FILERNAME John Travis Perez 3 Filer ID (Ethics Commission Filers)				
4 TOTAL OF UNITEM	IZED UNPAID INCURRED OBLIGATIONS \$ +				
5 Date 0}-22、20かみ	6 Payee name Vista Print				
7 Amount (\$)	8 Payee address; City; State; Zip Code				
# 107,62	100 Hayden Ave Lexinston MA 62421				
9 TYPE OF EXPENDITURE	Political Non-Political				
10	(a) Category (See Categories listed at the top of this schedule) (b) Description				
PURPOSE OF EXPENDITURE	Printing Expense Custom Cards				
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
11 Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
Date	Payee name				
Amount (\$)	Payee address; City; State; Zip Code				
TYPE OF EXPENDITURE	Political Non-Political				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Description				
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete ONLY if direct Candidate / Officeholder name Office sought Office held expenditure to benefit C/OH					
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED				

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel In District Travel Out Of District

Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense Printing Expense Candidate/Officeholder/Political Committee Legal Services Salaries/Wages/Contract Labor Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) John Travis Perez 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 6 Payee name 02-28-2022 Metal Custom QRs 7 Amount (\$) Zip Code 820 W Wingra# 259105 Madison 44.00 WI 12655 TYPE OF Political EXPENDITURE Non-Political 10 (a) Category (See Categories listed at the top of this schedule) (b) Description **PURPOSE** Solicitation / Fundraising Expans QR (ode display-Political) Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH 01-01-7027 Name Dadges Inc Amount (\$) Zip Code Cooper City FL 12240 SW 53 Rd Street Swite 511 27.97 77}}0 TYPE OF **EXPENDITURE** Non-Political Category (See Categories listed at the top of this schedule) Description **PURPOSE** Advertising Expense Name Badge, Political EXPENDITURE Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought Office held Complete ONLY if direct expenditure to benefit C/OH

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officeholder/Politica	- The state of the	ages/Contract Labor Other (enter a category not listed above)
1 Total pages Schedule F4:	2 FILERNAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CR	EDIT CARD \$
5 Date 01-18-2012	6 Payee name 60 Daddy. com LLC	
7 Amount (\$)	8 Payee address;	City; State; Zip Code
A 77.06	14455 N. Hayden Rd. Suite 219	Scottidale Arizona 85260
9 TYPE OF EXPENDITURE	Political Non-Pol	litical
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description
PURPOSE OF EXPENDITURE	Advertising Expense	Website domain-Political
	(C) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Of	ffice sought Office held
07 - 09 - 2021 Date	Payee name Jovi Printing	
Amount (\$)	Payee address;	City; State; Zip Code
4 411,35	11177 Katy Freeway	Howston Tx 77079
TYPE OF EXPENDITURE	Political Non-Po	ilitical
	Category (See Categories listed at the top of this schedule)	Description
PURPOSE OF EXPENDITURE	Printing Expenses	Sign Banner Political
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name O	ffice sought Office held
THE RESIDENCE AND A STREET SECTION OF THE STREET AND ST	ATTACH ADDITIONAL COPIES OF THIS S	CHEDULE AS NEEDED

SCHEDULE F4

		EXPENDITURE CATEGORIES FOR BOX 10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Made B Candidate/Officeholder/Politics	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Y Gift/Awards/Memorials Expense Printing Expense			
1	Total pages Schedule F4:	2 FILER NAME John Travi) Perez 3 Filer ID (Ethics Commission Filers)			
4	TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CREDIT CARD \$			
5	Date 12-07-2021	6 Payee name Go Daddy. com LLC			
7	Amount (\$) 694.09	8 Payee address; City; State; Zip Code 14455 N. Hayden Rd. Scottidale Arizona 85260 Suite 219			
9	TYPE OF EXPENDITURE	Political Non-Political			
10)	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	PURPOSE OF EXPENDITURE	Advertising Expense Website Domain political			
		(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	omplete <u>ONLY</u> if direct penditure to benefit C/OH	Candidate / Officeholder name Office sought Office held			
C)-25-2022	Payee name Fed Ex Office			
L	Amount (\$)	Payee address; City; State; Zip Code			
H	284.04	12191 Katy Fuy Houston TX 77079			
	TYPE OF EXPENDITURE	Political Non-Political			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense Political Card printing			
Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
	omplete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held			
sia silo me	entransessation de la surverse premières appearant les sons de la surverse de la surverse de la surverse de la	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

Candidate/Officenolder/Politic	cal Committee Legal Services Salaries/V	Wages/Contract Labor complete this form.	Other (enter a category not listed above)
1 Total pages Schedule F4:	John Travis Perez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEM	MIZED EXPENDITURES CHARGED TO A CR	REDIT CARD	\$ 0
5 Date 03-16-2022	6 Payee name		
7 Amount (\$)	8 Payee address;	City;	State; Zip Code
\$ 66.00	200 E 6th St Ste. 200	Austin	TX 78701
9 TYPE OF EXPENDITURE	Political Non-Po	olitical	
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description	
PURPOSE OF EXPENDITURE	Other	Online 6	Scaphics tool-Politicell
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Aus	stin, TX, officeholder living expense
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name C	Office sought	Office held
0}-17-2022	Payee name Vista Print		
∯ Amount (\$)	Payee address;	City;	State; Zip Code
152.44	100 Hayden Are	Lexington	MA 02421
TYPE OF EXPENDITURE	Political Non-Po	'olitical	
	Category (See Categories listed at the top of this schedule)	Description	
PURPOSE OF EXPENDITURE	Advertising Expense	Poli+: (al Stickers
	Check if travel outside of Texas. Complete Schedule T.	Check if Aus	stin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name C	Office sought	Office held
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDIII E V6 MEI	
	771100	OHEDGEE AG NEL	

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

Candidate/Officeholder/Politica	Al Committee Legal Services Salaries/W The Instruction Guide explains how to committee	Agges/Contract Labor Other (enter a category not listed above) omplete this form,				
1 Total pages Schedule F4:	2 FILERNAME John Travis Perez	3 Filer ID (Ethics Commission Filers)				
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CR	REDIT CARD \$				
5 Date 03-04- みみと	6 Payee name The Gober Group PLLC					
7 Amount (\$)	8 Payee address;	City; State; Zip Code				
A 8,618.00	POBOX 341016	Austin TX 78714				
9 TYPE OF EXPENDITURE	Political Non-Political					
10	(a) Category (See Categories listed at the top of this schedule)	(b) Description				
PURPOSE OF EXPENDITURE	Legal Services	Legal Fee, for compaign				
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name O	ffice sought Office held				
Date 03-07-2022	Payee name Campaign Verify, Inc					
Amount (\$)	Payee address;	City; State; Zip Code				
95.00	8605 Westwood (enter Driv Suite 505	ve Vienna VA 22182				
TYPE OF EXPENDITURE	Political Non-Political					
	Category (See Categories listed at the top of this schedule)	Description				
PURPOSE OF EXPENDITURE	Other	Identity Veritication-Online				
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Check if Austin, TX, officeholder living expense Office sought Office held				

POLITICAL EXPENDITURES MADE FROM **PERSONAL FUNDS**

Event Expense

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to	complete this form.		
1 Total pages Schedule G:	2 FILER NAME John Trans Perez	3 Filer ID (Ethics Commission Filers)		
4 Date ()] - () - 2021	Sprint 2 Print			
6 Amount (\$) 9 \$7.7\$ Reimbursement from political contributions intended	7 Payee address; 8748 Clay Rd Ste 301	City; Hows-	State;	Zip Code 7 7080
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (c) Check if travel outside of Texas. Complete Schedule T.) Politica	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	C	Office held
0 J - 7 L - 30 J T	Payee name American Expres			
Amount (\$) 77.06 Reimbursement from political contributions intended	Payee address; POBox 650 448	city; Dallas	State;	Zip Code 25-265 -0448
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment Check if travel outside of Texas, Complete Schedule T.	Payment of Credit (and bill for Political webs; it e Domain Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate / Officeholder name	Office sought		Office held
03-28.5047	Payee name Chare			
Amount (\$) Y . 35 Reimbursement from political contributions intended	Payee address; POBOX 1512) Wi	city; (Mington	State; Delaware	Zip Code 2 19 5 50 -5123
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit (and Payment	payment of Credit Card bill for politice Sign Namer printing expenses		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	Check if Austin	n, TX, officeholder living ex	pense Office held
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED)ED	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Credit Card Payment	The Instruction Guide explains how to	complete this form.	Other (enter a catego	ry not listed above)		
1 Total pages Schedule G:	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)				
4 Date 	American Express					
6 Amount (\$) 9 9 9 0 9 Reimbursement from political contributions	7 Payee address;	city; Pallus	State;	Zip Code 75 265-6448		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (rediff (ard Expense) (c) Check if travel outside of Texas. Complete Schedule T.	website domain-political				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	, TX, officeholder living e	Office held		
03-28-2022	Payee name American Express					
Amount (\$) 9,287,45 Reimbursement from political contributions intended	Payee address;	City; Dallas	State;	Zip Code 75265-0448		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit (ard Payment	Description far bill for polit; advertising, ot	yment for Co cal printing ther temperan	redit lard expense, fundrating legal fees		
	Check if travel outside of Texas. Complete Schedule T. Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought Office held				
Complete ONLY if direct expenditure to benefit C/C		Onice sought		Office held		
Date	Payee name					
Amount (\$)	Payee address;	City;	State;	Zip Code		
Reimbursement from political contributions intended						
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description				
	Check if travel outside of Texas, Complete Schedule T,	Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought		Office held		
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED						