

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <div style="text-align: center; font-size: 1.2em;">28</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <div style="font-size: 1.2em;">MR</div>	FIRST <div style="font-size: 1.2em;">John</div>	OFFICE USE ONLY
	NICKNAME	LAST <div style="font-size: 1.2em;">Perez</div>	
MI <div style="font-size: 1.2em;">J</div>	SUFFIX		Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em;">13815 Taylorcrest Road Houston Texas 77079</div>		Date Hand-delivered or Date Postmarked
	Area Code: (713) Phone Number: 882 - 0182		
5 CANDIDATE / OFFICEHOLDER PHONE	MS / MRS / MR <div style="font-size: 1.2em;">MR</div>	FIRST <div style="font-size: 1.2em;">Brian</div>	Receipt #
	NICKNAME	LAST <div style="font-size: 1.2em;">Schwertner</div>	
MI <div style="font-size: 1.2em;">J</div>	SUFFIX		Amount \$
6 CAMPAIGN TREASURER NAME	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="font-size: 1.2em;">13930 Kingside Ln. Houston TX 77079</div>		Date Processed
	Area Code: (281) Phone Number: 589 - 2125		
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	Area Code: (281) Phone Number: 589 - 2125		Date Imaged
	Area Code: (281) Phone Number: 589 - 2125		
8 CAMPAIGN TREASURER PHONE	9 REPORT TYPE		
	<input type="checkbox"/> January 15 <input checked="" 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)		
10 PERIOD COVERED	11 ELECTION		
	ELECTION DATE: Month / Day / Year ELECTION TYPE: 01 / 19 / 2022 THROUGH 03 / 28 / 2022 <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
12 OFFICE	13 OFFICE SOUGHT (if known)		
	OFFICE HELD (if any): SBISD School Trustee Position 6		
14 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. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS		

GO TO PAGE 2

RECEIVED

APR 6 2022

BY: *Marie Dickens*

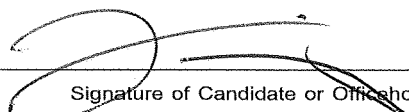
Revised 8/17/2020

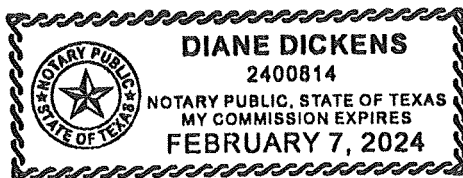
CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 2**

15 C/OH NAME <u>John Travis Perez</u>		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>13,243.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ <u>0</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>31,024.79</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>13,281.89</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>5,050.00</u>

18 SIGNATURE 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.


Signature of Candidate or Officeholder



Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

Sworn to and subscribed before me by John Travis Perez this the 6 day of April, 2022, to certify which, witness my hand and seal of office.
Diane Dickens Diane Dickens notary public
 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is _____, and my date of birth is _____.
 My address is _____, _____, _____, _____, _____.
 (street) (city) (state) (zip code) (country)
 Executed in _____ County, State of _____, on the _____ day of _____, 20____.
 (month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME <i>John Travis Perez</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 12,433.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 810.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 5,050.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 4,201.24
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 4,895.87
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 10,469.95
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 11,457.73
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)
4 Date 02-01-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cindy McClain	7 Amount of contribution (\$) \$ 50.00
6 Contributor address; City; State; Zip Code 4445 Mc Farlin Boulevard Dallas, Texas 75205		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/02/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beau Ryan	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 13627 Comely Lane Houston, Texas 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/06/2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Katie Camarillo	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code 12458 Kimberly Ln Houston Texas 77024		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 2-16-22	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heidi Holcomb	Amount of contribution (\$) \$ 500.00
Contributor address; City; State; Zip Code 13727 Alchester Lane Houston TX 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)

4 Date

02-19-2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Tye Justice

7 Amount of contribution (\$)

\$50.00

6 Contributor address;

City;

State;

Zip Code

15 Stonegate Dr Houston TX 77024

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02-19-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ashley Zahn

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

8511 Cedarbrake Dr Houston TX 77055

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02-21-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Valerie Manis

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

8335 Ginger Oak Street Houston TX 77055

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02-22-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Diane Chong

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

13155 Rummel Creek Rd Houston TX 77079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)

4 Date

02-25-2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Barbara Peterson

7 Amount of contribution (\$)

\$250.00

6 Contributor address;

City;

State;

Zip Code

502 Longwood Lane Houston TX 77024

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

02-28-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Matthew Salo

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

231 Faust Lane Houston TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-07-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Ara Hardig

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

12327 Boheme Drive Houston TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-08-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Lara Ryan

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

13627 Comely Lane Houston TX 77079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)

4 Date

03-08-2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Beverly Ekstrom

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

702 West Forest Dr Houston TX 77079

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03-09-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Nadia Sledge

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

14106 Barry Knoll Ln Houston TX 77079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-09-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Bruce Morisse

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

827 Thornvine Ln Houston TX 77079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-09-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

John Schell

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

13430 amber Queen Lane Houston TX 77041

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)

4 Date

03-10-2022

5 Full name of contributor

☐ out-of-state PAC (ID#: _____)

Emily Sperandio

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

706 Camelot Lane Houston TX 77024

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03-10-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Chip & Ronnye Cowell

Amount of contribution (\$)

\$500.00

Contributor address;

City;

State;

Zip Code

11020 Kemwood Drive Houston TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-10-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Linley Dieringer

Amount of contribution (\$)

\$250.00

Contributor address;

City;

State;

Zip Code

13726 AppleTree Rd Houston TX 77079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-10-2022

Full name of contributor

☐ out-of-state PAC (ID#: _____)

Becky Clark

Amount of contribution (\$)

\$100.00

Contributor address;

City;

State;

Zip Code

13302 Taylorcrest Rd Houston TX 77079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)
4 Date 03-10-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheri Stegent 6 Contributor address; City; State; Zip Code 13318 Kimberley Lane Houston TX 77079	7 Amount of contribution (\$) \$ 500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03-22-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Catherine Sullivan Contributor address; City; State; Zip Code 13315 Perthshire Houston TX 77079	Amount of contribution (\$) \$ 100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03-23-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joann Basham Contributor address; City; State; Zip Code 10306 Longmont Dr Houston TX 77042	Amount of contribution (\$) \$ 25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03-24-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizabeth Diar Contributor address; City; State; Zip Code 12203 Broken Dough Drive Houston TX 77024	Amount of contribution (\$) \$ 200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)

4 Date

03-24-2022

5 Full name of contributor

☐ out-of-state PAC (ID#:

Jonathan Barrett

7 Amount of contribution (\$)

\$ 308.00

6 Contributor address;

City;

State;

Zip Code

1811 Bering Drive 400 Houston TX 77057

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

03-28-2022

Full name of contributor

☐ out-of-state PAC (ID#:

Terence Townsend

Amount of contribution (\$)

\$ 100.00

Contributor address;

City;

State;

Zip Code

21 Inverness Parkway Houston TX 77055

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

03-28-2022

Full name of contributor

☐ out-of-state PAC (ID#:

John Wallace

Amount of contribution (\$)

\$ 150.00

Contributor address;

City;

State;

Zip Code

6763 Woodway Suite 100 Houston TX 77057

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

02-04-2022

Full name of contributor

☐ out-of-state PAC (ID#:

Page Schwertner

Amount of contribution (\$)

\$ 500.00

Contributor address;

City;

State;

Zip Code

13930 Kingsride Ln Houston TX 77079

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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)
4 Date 02-04-2022	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brian Schwertner	7 Amount of contribution (\$) \$ 500.00
6 Contributor address; City; State; Zip Code 13930 Kings ridge Ln Houston TX 77079		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 03-01-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jennifer Hyland	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 815 ST. Francis Lane Houston Tx 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03-01-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay Cox	Amount of contribution (\$) \$ 1,000.00
Contributor address; City; State; Zip Code 13511 Kimberley Houston TX 77079		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 03-11-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Wuebbels	Amount of contribution (\$) \$ 100.00
Contributor address; City; State; Zip Code 13923 Taylorcrest Rd Houston TX 77079-5816		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 9
2 FILER NAME <div style="text-align: center; font-size: 1.2em;">John Travis Perez</div>		3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center;">03-11-2022</div>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center; font-size: 1.2em;">Heidi Holcomb</div>	7 Amount of contribution (\$) <div style="text-align: center; font-size: 1.2em;">\$500.00</div>
6 Contributor address; City; State; Zip Code <div style="text-align: center;">13727 Alchester Lane Houston TX 77079-7010</div>		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date <div style="text-align: center;">03-11-2022</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center; font-size: 1.2em;">Anne Hachtman</div>	Amount of contribution (\$) <div style="text-align: center; font-size: 1.2em;">\$5,000.00</div>
Contributor address; City; State; Zip Code <div style="text-align: center;">13006 Conifer Rd Houston TX 77079-7706</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date <div style="text-align: center;">03-26-2022</div>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <div style="text-align: center; font-size: 1.2em;">Lacy Riecke</div>	Amount of contribution (\$) <div style="text-align: center; font-size: 1.2em;">\$100.00</div>
Contributor address; City; State; Zip Code <div style="text-align: center;">511 Westmister Dr Houston TX 77024-5623</div>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
 If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A2: 3

2 FILER NAME

John Travis Perez

3 Filer ID (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS

\$ 0

5 Date

03-09-2022

6 Full name of contributor ☐ out-of-state PAC (ID#:

Anne Hachtman

8 Amount of Contribution \$

\$135.00

9 In-kind contribution description

Campaign Event
Food + Drink

7 Contributor address; City; State; Zip Code

13006 Conifer Rd Houston TX 77079-7106

☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)

11 Employer (FOR NON-JUDICIAL)(See Instructions)

12 Contributor's principal occupation (FOR JUDICIAL)

13 Contributor's job title (FOR JUDICIAL)(See Instructions)

14 Contributor's employer/law firm (FOR JUDICIAL)

15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

Date

03-09-2022

Full name of contributor ☐ out-of-state PAC (ID#:

Lajeana Hardig

Amount of Contribution \$

\$135.00

In-kind contribution description

Campaign event
Food + Drink

Contributor address; City; State; Zip Code

13307 Kimberley lane Houston TX 77079

☐ 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)

Contributor's job title (FOR JUDICIAL)(See Instructions)

Contributor's employer/law firm (FOR JUDICIAL)

Law firm of contributor's spouse (if any) (FOR JUDICIAL)

If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A2: 3	
2 FILER NAME John Travis Perez				3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$ 0	
5 Date 03-09-2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay Cox			8 Amount of Contribution \$ \$135.00	9 In-kind contribution description Campaign Event food & Drink
7 Contributor address; City; State; Zip Code 13511 Kimberley Houston TX 77079			<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)			13 Contributor's job title (FOR JUDICIAL)(See Instructions)		
14 Contributor's employer/law firm (FOR JUDICIAL)			15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
Date 03-09-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kerry Brendel			Amount of Contribution \$ \$135.00	In-kind contribution description Campaign Event Food & Drink
Contributor address; City; State; Zip Code 13603 Tosca Ln Houston TX 77079			<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)			Contributor's job title (FOR JUDICIAL)(See Instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.					

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: 3	
2 FILER NAME John Travis Perez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0	
5 Date 03-09-2022	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark Eubanks	8 Amount of Contribution \$ \$ 135	9 In-kind contribution description Campaign Event Food & Drink
7 Contributor address; City; State; Zip Code 13918 Saint Mary's Lane Houston TX 77079		<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)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 03-09-2022	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sara Long	Amount of Contribution \$ \$ 135.00	In-kind contribution description Campaign Event Food & Drink
Contributor address; City; State; Zip Code 13911 Pinerock Ln Houston TX 77079		<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)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME John Travis Perez		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 0
5 Date of loan 01-19-2022	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) John Travis Perez	9 Loan Amount (\$) \$ 5,000.00
6 Is lender a financial Institution? Y (N)	8 Lender address; City; State; Zip Code 13815 Taylorcrest Road Houston Texas 77079	10 Interest rate 0
		11 Maturity date —
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan 01-21-2022	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) John Travis Perez	Loan Amount (\$) \$ 50.00
Is lender a financial Institution? Y (N)	Lender address; City; State; Zip Code 13815 Taylorcrest Road Houston Texas 77079	Interest rate 0
		Maturity date —
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (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

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: 2	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 Date 03-23-2022	5 Payee name Harland Clarke	
6 Amount (\$) \$ 47.16	7 Payee address; City; State; Zip Code 15955 La Cantera Parkway San Antonio TX 78256	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) office overhead/ Rental Expense	(b) Description checks
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 02-15-2022	Payee name Mammoth Marketing Group	
Amount (\$) \$ 1,500.00	Payee address; City; State; Zip Code 4500 Bissonnet Street Suite 370 Bellaire TX 77401	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Website Development
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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		
Date 07-28-2022	Payee name Sprint 2 Print	
Amount (\$) \$ 2,458.36	Payee address; City; State; Zip Code 8748 Clay Rd Ste. 300 Houston TX 77080	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

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

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: 2	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 Date 1-21-22 through 03-28-22	5 Payee name Anedot Inc.	
6 Amount (\$) \$ 195.72	7 Payee address; City; State; Zip Code 1340 Poydras Street New Orleans LA 70112 Suite 1770	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Service Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
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
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
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 F2: 3	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0
5 Date 02-01-2022	6 Payee name Coobo Media	
7 Amount (\$) \$ 912.80	8 Payee address; City; State; Zip Code 9525 Katy Freeway Houston TX 77024 Suite 230	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Cards + Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 02-01-2022	Payee name Coobo Media		
Amount (\$) \$ 879.45	Payee address; City; State; Zip Code 9525 Katy Freeway Houston TX 77024 Suite 230		
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expenses	Description Logo and Card Design	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
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 F2: 3	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$ 0
5 Date 07-27-2022	6 Payee name ORR Strategy Group	
7 Amount (\$) \$ 2,500.00	8 Payee address; 1707 1/2 Post Oak Blvd #407	City; State; Zip Code Houston TX 77056
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 03-25-2022	Payee name Clockwork Consulting, LLC		
Amount (\$) \$ 500.00	Payee address; 1347 Lamonte Ln	City; State; Zip Code Houston TX 77018	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Website Consulting	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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

UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
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 F2: 3	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0
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5 Date 03-22-2022	6 Payee name Vista Print
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7 Amount (\$) \$ 103.62	8 Payee address; 100 Hayden Ave	City; Lexington	State; MA	Zip Code 02421
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Custom Cards
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

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
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 F4: 5		2 FILER NAME John Travis Perez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$ 0	
5 Date 02-28-2022		6 Payee name Metal Custom QRs			
7 Amount (\$) \$ 44.00		8 Payee address; 820 W Wingra #259105 Madison WI 53725			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation / Fundraising Expense		(b) Description QR Code display - Political	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
11 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
				Office held	
Date 03-01-2022		Payee name Name Badges Inc			
Amount (\$) \$ 27.97		Payee address; 12240 SW 53rd Street Suite 511 Cooper City FL 33330			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description Name Badges Political	
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
				Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURES MADE BY CREDIT CARD

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
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 F4: 5	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0
5 Date 01-18-2022	6 Payee name GoDaddy.com LLC	
7 Amount (\$) \$ 77.06	8 Payee address; 14455 N. Hayden Rd. Suite 219	City; State; Zip Code Scottsdale Arizona 85260
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website domain - Political
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03-09-2022	Payee name Jovi Printing	
Amount (\$) \$ 411.35	Payee address; 11177 Katy Freeway Suite C	City; State; Zip Code Houston TX 77079
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expenses	Description Sign Banner Political
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Printing Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services		Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 5	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0
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. Scottsdale Arizona 85260 Suite 219	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Website Domain political
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date 07-25-2022	Payee name FedEx Office	
Amount (\$) \$ 284.04	Payee address; City; State; Zip Code 12191 Katy Fwy Houston TX 77079	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Political Card printing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> 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		

EXPENDITURES MADE BY CREDIT CARD

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
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 F4: 5	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0
5 Date 03-16-2022	6 Payee name Canva	
7 Amount (\$) \$ 66.00	8 Payee address; 200 E 6th St Ste. 200	City; State; Zip Code Austin TX 78701
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Online Graphics tool - Political
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03-17-2022	Payee name Vista Print	
Amount (\$) \$ 152.44	Payee address; 100 Hayden Ave	City; State; Zip Code Lexington MA 02421
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Political Stickers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

EXPENDITURES MADE BY CREDIT CARD

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
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 F4: 5	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0
5 Date 03-04-2022	6 Payee name The Gohar Group PLLC	
7 Amount (\$) \$ 8,618.00	8 Payee address; PO Box 341016	City; State; Zip Code Austin TX 78714
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description Legal Fees for campaign
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 03-07-2022	Payee name Campaign Verify, Inc	
Amount (\$) \$ 95.00	Payee address; 8605 Westwood Center Drive Suite 505	City; State; Zip Code Vienna VA 22182
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Identity Verification - online
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		

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
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: 2	2 FILER NAME John Travis Perez	3 Filer ID (Ethics Commission Filers)
4 Date 03-07-2022	5 Payee name Sprint 2 Print	
6 Amount (\$) 987.78 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; 8748 Clay Rd Ste 300	City; State; Zip Code Houston TX 77080
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description Signs Political
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held		
Date 02-28-2022	Payee name American Express	
Amount (\$) 77.06 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; PO Box 650448	City; State; Zip Code Dallas TX 75265-0448
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description Payment of Credit Card bill for Political website Domain
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03-28-2022	Payee name Chase	
Amount (\$) 411.35 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; PO Box 15121	City; State; Zip Code Wilmington Delaware 19850-5121
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Credit Card Payment	Description payment of Credit Card bill for political Sign Damer printing expenses
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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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: <div style="text-align: center; font-size: 1.5em;">2</div>	2 FILER NAME <div style="text-align: center; font-size: 1.2em;">John Travis Perez</div>	3 Filer ID (Ethics Commission Filers)
4 Date <div style="text-align: center; font-size: 1.2em;">12-21-2021</div>	5 Payee name <div style="text-align: center; font-size: 1.2em;">American Express</div>	
6 Amount (\$) <div style="text-align: center; font-size: 1.2em;">\$ 694.09</div> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.2em;">PO Box 650448 Dallas TX 75265-0448</div>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.2em;">Credit Card Expense ^{Payment}</div>	(b) Description <div style="text-align: center; font-size: 1.2em;">payment of credit card bill for website domain-political</div>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date <div style="text-align: center; font-size: 1.2em;">03-28-2022</div>	Payee name <div style="text-align: center; font-size: 1.2em;">American Express</div>	
\$ Amount (\$) <div style="text-align: center; font-size: 1.2em;">\$ 9,287.45</div> <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code <div style="text-align: center; font-size: 1.2em;">PO Box 650448 Dallas TX 75265-0448</div>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <div style="text-align: center; font-size: 1.2em;">Credit Card Payment</div>	Description <div style="text-align: center; font-size: 1.2em;">Payment for credit card bill for political, printing expense, fundraising, advertising, other, campaign legal fees</div>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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