

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: _____

2 Total pages filed: _____

3 CANDIDATE / OFFICEHOLDER NAME	MR. MRS. / FIRST LAST Mrs. Vanessa J SUCRNAME A.S.T. Perez	OFFICE USE ONLY REC'D CITY SEC OFF JUL 17 '23 PM5:29 Date Hand Delivered / Date Reopened Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS (NO BOX) APT. / SUITE # CITY STATE ZIP CODE 414 Crossbill Laredo, TX 78045	
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 473-9129	
6 CAMPAIGN TREASURER NAME	MR. MRS. MRS. FIRST MI Mrs. Petra SUCRNAME LAST SUFFIX Castro	
7 CAMPAIGN TREASURER ADDRESS <input type="checkbox"/> Residence <input type="checkbox"/> Business	STREET ADDRESS (NO PO BOX PLEASE) APT. / SUITE # CITY STATE ZIP CODE 602 Longspur Laredo, TX 78045	
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (956) 740-3510	
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15m day after campaign resource appointment (Candidates Only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 90th day before election <input type="checkbox"/> Elected/Modified Reporting Unit <input type="checkbox"/> Final Report (after 12/31/22)	
10 PERIOD COVERED	Month Day Year Month Day Year Jan 1 2023 THROUGH June 30 2023	
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> Other (Specify) office holder <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD BY (13) OFFICE (PERSON) (If Applicable) City Council Member District 7	
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"/> CAMPAIGN COMMITTEE CAMPAIGN TREASURER NAME COMMITTEE CAMPAIGN TREASURER NAME	

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

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

15 C/OH NAME		16 <small>Fig. 10 - Ethics Commission Files</small>	
17 CONTRIBUTION TOTALS	1	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS (UP CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 48,150
EXPENDITURE TOTALS	3	TOTAL UNITEMIZED POLITICAL EXPENDITURE	\$ 2,540.28
	4	TOTAL POLITICAL EXPENDITURES	\$ 4,982.39
CONTRIBUTION BALANCE	5	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 47,879.41
OUTSTANDING LOAN TOTALS	6	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,750

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.

Vanessa Perez
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

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

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Vanessa Perez and my date of birth is 2/10/82 VP
 My address is 414 Crossbill Laredo TX 78045 USA
(street) (city) (state) (zip code) (country)
 Executed in Webb County State of Texas on the 17th day of July 20 23
(month) (year)
Vanessa Perez
 Signature of Candidate/Officeholder/Declaration

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

18 FILER NAME Vanessa Perez 20 FILER ID: Ethics Commission Filers

21 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
<input checked="" type="checkbox"/> SCHEDULE A1 MONETARY POLITICAL CONTRIBUTIONS	\$ 48,150
<input type="checkbox"/> SCHEDULE A2 NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
<input type="checkbox"/> SCHEDULE B PLEDGED CONTRIBUTIONS	\$
<input type="checkbox"/> SCHEDULE E LOANS	\$
<input checked="" type="checkbox"/> SCHEDULE F1 POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,442.11
<input type="checkbox"/> SCHEDULE F2 UNPAID INCURRED OBLIGATIONS	\$
<input type="checkbox"/> SCHEDULE F3 PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
<input type="checkbox"/> SCHEDULE F4 EXPENDITURES MADE BY CREDIT CARD	\$
<input type="checkbox"/> SCHEDULE G POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
<input type="checkbox"/> SCHEDULE H PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
<input type="checkbox"/> SCHEDULE I NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
<input type="checkbox"/> SCHEDULE K INTEREST CREDITS GAINS REFUNDS AND CONTRIBUTIONS RETURNED TO FILER	\$

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 to prepare A1 12
2 FILER NAME Vanessa Perez		3 Fee to collect Contribution Fees
4 Date 2/18/23	5 Full name of contributor Raul Garza	7 Amount of contribution (\$) 2,000
	6 Contributor address 126 Redwing Ct. Laredo, TX 78045	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/10/23	Full name of contributor Jorge "JO" Delgado	Amount of contribution (\$) 500
	Contributor address 3107 Dante Ln. Laredo, TX 78041	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/15/23	Full name of contributor Shashi Vaswani	Amount of contribution (\$) 1,000
	Contributor address 101 Canterbury Laredo, TX 78041	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/23	Full name of contributor Fasken Management	Amount of contribution (\$) 1,500
	Contributor address 6101 Holiday Hill Rd Midland TX 79707	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

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	12
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Vanessa Perez			
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	7 Amount of contribution (\$) 2,000	
3/23/23	G.A. Leyendecker		
6 Contributor address City State Zip Code			
P.O. Box 1827 Laredo, TX 78044			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	Amount of contribution (\$) 2,000	
3/13/23	Eduardo Garza		
Contributor address City State Zip Code			
506 Merlin Laredo, TX 78041			
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 (\$) 1,000	
3/14/23	Kazen, Meurer & Perez		
Contributor address City State Zip Code			
P.O. Box 6237 78042			
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 (\$) 1,000	
3/25/23	Leonardo Munoz		
Contributor address City State Zip Code			
3813 Tierra de Oro Westco TX 78516			
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 12
2 FILER NAME Vanessa Perez		3 Filer ID (Ethics Commission Filer)
4 Date 3/21	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# Eduardo E. Lozano	7 Amount of contribution (\$) 250
6 Contributor address City State Zip Code 8505 Collow Ct. Laredo, TX 78045		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# Jose D. Gonzalez	Amount of contribution (\$) 300
Contributor address City State Zip Code 4506 Modern Lane Laredo, TX 78041		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# Ermilo Enrique Richer III	Amount of contribution (\$) 500
Contributor address City State Zip Code 834 Union Pacific Laredo, TX 78045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/21	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# Nydia Rosa Garcia Pena	Amount of contribution (\$) 250
Contributor address City State Zip Code 1514 Convent Laredo, TX 78040		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1	12
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	7 Amount of contribution (\$)	
3/21	Arturo Dominguez 6 Contributor address City State Zip Code 102 Granada Laredo TX 78041	800	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	Amount of contribution (\$)	
3/21	Marina Lizbeth Rodriguez Gil Contributor address City State Zip Code 402 Cambridge Lp. Laredo TX 78045	500	
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 (\$)	
3/21	Memo Castro Contributor address City State Zip Code 602 Longspur Laredo TX 78045	250	
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 (\$)	
3/27	Fernando Beldazo Contributor address City State Zip Code 3815 Crestwind Laredo, Tx 78045	250	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1	12
2 FILER NAME		3 Filer ID (Ethics Commission Files)	
Vanessa Perez			
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	7 Amount of contribution (\$)	
3/23/23	Edgar Martinez	500	
6 Contributor address City State Zip Code			
3804 Copper Bend Laredo, TX 78045			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	Amount of contribution (\$)	
3/23/23	Rafael Orduna	250	
Contributor address City State Zip Code			
1309 Nicklaus Loop Laredo, TX 78045			
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 (\$)	
3/23/23	Mario Palos Garza	250	
Contributor address City State Zip Code			
8417 Amparan Laredo, TX 78045			
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 (\$)	
3/29/23	Nyria Ramos	200	
Contributor address City State Zip Code			
107 Date Palm Laredo, TX 78045			
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1	12
2 FILER NAME		Vanessa Perez	
3 Filer ID (Ethics Commission Filer)			
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	7 Amount of contribution (\$)	
3/29/23	Jed Brown	2,000	
6 Contributor address City State Zip Code			
106 Elkington Ln. Laredo, TX 78045			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	Amount of contribution (\$)	
3/29/23	Mike Barbarez	2,000	
Contributor address City State Zip Code			
7902 E Country Dr. Apt. 113 Laredo, TX 78045			
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 (\$)	
3/28/23	Steve Lamantia	1,500	
Contributor address City State Zip Code			
410 Crossroads Laredo, TX 78045			
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 (\$)	
3/29	Robert Judd Gilpin	2,000	
Contributor address City State Zip Code			
1409 Glenwood Laredo, TX 78045			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1 12
2 FILER NAME Vanessa Perez		3 Filer ID (Ethics Commission Filer)
4 Date 3/29/23	5 Full name of contributor <input type="checkbox"/> out-of state PAC ID# Kurt Kraus	7 Amount of contribution (\$) 2,000
6 Contributor address City State Zip Code 10410 Medical Loop Unit 1A Laredo, TX 78045		
8 Principal occupation - Job title (See Instructions)		9 Employer (See Instructions)
Date 3/29/23	Full name of contributor <input type="checkbox"/> out-of state PAC ID# Jo Ann Piland	Amount of contribution (\$) 100
Contributor address City State Zip Code 508 Sandpiper Laredo, TX 78045		
Principal occupation - Job title (See Instructions)		Employer (See Instructions)
Date 3/29/23	Full name of contributor <input type="checkbox"/> out-of state PAC ID# Arturo Garza-Gonzalez MD	Amount of contribution (\$) 250
Contributor address City State Zip Code 7210 McPherson Suite 120 Laredo, TX 78041		
Principal occupation - Job title (See Instructions)		Employer (See Instructions)
Date 3/29/23	Full name of contributor <input type="checkbox"/> out-of state PAC ID# Eduardo Quiroga	Amount of contribution (\$) 1,000
Contributor address City State Zip Code 2407 Boros Ct. Laredo TX 78041		
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	12
2 FILER NAME		3 Filer ID Ethics Commission Form	
Vanessa Perez			
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	7 Amount of contribution (\$) :	
3/29/23	Sheldon Gallegos	500	
	6 Contributor address City State Zip Code		
	1303 Colledel Norte Ste. 800 Laredo, TX 78041		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	Amount of contribution (\$) :	
3/29/23	Sergio Montante	1,000	
	Contributor address City State Zip Code		
	7302 Ezra Pound Laredo, TX 78041		
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 (\$) :	
3/29/23	Hachar Investment LP	2,500	
	Contributor address City State Zip Code		
	3302 Cuatro Vientos Dr. Ste 200 Laredo, TX 78046		
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 (\$) :	
3/29/23	Top Site Civil Group	1,000	
	Contributor address City State Zip Code		
	6262 McPherson Ste. 206 Laredo, TX 78041		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form		1 Total pages Schedule A1 12
2 FILER NAME Vanessa Perez		3 File ID (Ethics Commission files)
4 Date 3/28/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID# Donato Ramos Jr.	7 Amount of contribution (\$) 2,500
6 Contributor address City State Zip Code 6721 McPherson Ste. 350 Laredo, TX 78041		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/29/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# Lorena Martinez-Fernandez	Amount of contribution (\$) 250
Contributor address City State Zip Code 8503 Pleyer Ct. Laredo, TX 78045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/29/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# A. Elizabeth Hinojosa	Amount of contribution (\$) 250
Contributor address City State Zip Code 1539 Summit Laredo, TX 78045		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/27/23	Full name of contributor <input type="checkbox"/> out-of-state PAC ID# J. C. Florino	Amount of contribution (\$) 250
Contributor address City State Zip Code 1133 Broadway San Antonio TX 78215		
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)	12
2 FILER NAME		Vanessa Perez	
3 Filer ID - Ethics Commission Filer			
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	7 Amount of contribution (\$)	
3/28/23	Victor M. De Anda Jr. 6 Contributor address City State Zip Code 2905 Chaucer Dr. Laredo, TX 78041	1,000	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#	Amount of contribution (\$)	
3/29/23	Juan Homero Sanchez Contributor address City State Zip Code 308 Le Tour Laredo, TX 78041	1,000	
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 (\$)	
3/28/23	Raul Valdez Contributor address City State Zip Code 108 Devonshire Laredo, TX 78041	2,500	
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 (\$)	
3/29/23	Flores, Flores and Candez Contributor address City State Zip Code 5517 McPherson Ste. 15 Laredo, TX 78041	1,000	
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

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The Instruction Guide explains how to complete this form		1 Total pages Schedule A1	12
2 FILER NAME		Vanessa Perez	
3 Filer ID: Ethics Commission Filer			
4 Date	5 Full name of contributor <input type="checkbox"/> out of state PAC ID#	7 Amount of contribution (\$) :	
3/30/23	Jesus Ruiz	1,000	
6 Contributor address City State Zip Code			
8902 Cornell Laredo Tx 78045			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out of state PAC ID#	Amount of contribution (\$) :	
3/29/23	Kristina Laurel Hele	750	
Contributor address City State Zip Code			
2308 Middlecoff Ln. Laredo, TX 78045			
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 (\$) :	
4/11/23	Andrew Brittingham	1,000	
Contributor address City State Zip Code			
5810 San Bernardo Suite 102 Laredo, TX 78041			
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 (\$) :	
4/17/23	Killam Ltd	2,000	
Contributor address City State Zip Code			
P.O. Box 499 Laredo, TX 78042			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements</p>			

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	12
2 FILER NAME		Vanessa Perez	
3 Filer ID (Ethics Columns on Filer)			
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (See Instructions)	7 Amount of contribution (\$) 1,500	
4/25/23	Russell Ford		
6 Contributor address City State Zip Code			
6010 McPherson Rd. Ste. 300 Laredo, TX 78041			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (See Instructions)	Amount of contribution (\$) 500	
4/24/23	John or Anna Gelo		
Contributor address City State Zip Code			
104 Brand Dr. Laredo, TX 78043			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (See Instructions)	Amount of contribution (\$) 2,000	
6/7/23	Robert Muller Ltd.		
Contributor address City State Zip Code			
1149 Cardinal Laredo, TX 78045			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (See Instructions)	Amount of contribution (\$) 0	
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

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)

- | | | | |
|---|--|---|--|
| <ul style="list-style-type: none"> ✓ Advertising Expenses ✓ Accounting Expenses ✓ Consulting Expenses ✓ Contributions to Persons Made by Candidates, Officers, or Political Committees ✓ Other | <ul style="list-style-type: none"> ✓ Event Expenses ✓ Food ✓ Gift Giving and Expense ✓ Gift Accounts, Mileage, and Expense ✓ Legal Expenses | <ul style="list-style-type: none"> ✓ Mail Expenses, Mailing Materials ✓ No-wear Labels, Postage, and Postage ✓ Office Expenses ✓ Printing Expenses ✓ Stationery Expenses ✓ Telephone Expenses ✓ Travel Expenses ✓ Other | <ul style="list-style-type: none"> ✓ Substances of a Personal Nature ✓ Transportation, Equipment, & Material Expenses ✓ Travel Expenses ✓ Travel Expenses ✓ Other |
|---|--|---|--|

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 4	2 FILER NAME Vanessa Perez	3 Filer ID (Elect. Commission) None
4 Date 1/23/23	5 Payee name Dollar Tree	
6 Amount (\$) 89.10	7 Payee address 5410 San Bernardo	City State Zip Code Laredo TX 78041
8 PURPOSE OF EXPENDITURE	(a) Category (see categories listed at the top of this schedule) Gift Expense	(b) Description Valentine's Gifts
	(c) <input type="checkbox"/> Check if travel outside of Texas (complete Schedule F)	<input type="checkbox"/> Check if used for campaign or office expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 1/23/23	Payee name Dollar Tree
Amount (\$) 70.90	Payee address 5203 Bob Bullock 5410 San B ste. 110
	City State Zip Code Laredo TX 78045
PURPOSE OF EXPENDITURE	Category (see categories listed at the top of this schedule) Gift expense
	Description Valentine's Gifts
	<input type="checkbox"/> Check if travel outside of Texas (complete Schedule F) <input type="checkbox"/> Check if used for campaign or office expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held

Date 1/23/23	Payee name Target
Amount (\$) 164.84	Payee address 7501 San Dario
	City State Zip Code Laredo TX 78041
PURPOSE OF EXPENDITURE	Category (see categories listed at the top of this schedule) Gift expense
	Description Valentine's Gifts
	<input type="checkbox"/> Check if travel outside of Texas (complete Schedule F) <input type="checkbox"/> Check if used for campaign or office 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 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 Expense
Consulting Expense
Conferences/Conventions Made by Candidates/Officeholders/Political Committee
Post Card Payment | Event Expense
Fees
Food/Beverage Expense
Gift Awards/Memorabilia Expense
Legal Services | Loan Repayment/Reimbursement
Office Governance/Political Expense
Printing Expense
Printing Expense
Salaries/Wages/Contract Labor | Subscriptions/Fundraising Expense
Transportation/Equipment & Related Expense
Travel/Out of 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 4		2 FILER NAME Vanessa Perez		3 Filer ID (Ethics Commission Filer)	
4 Date 2/13/23		5 Payee name Water 2 Wine			
6 Amount (\$) 343.92		7 Payee address 3300 W Anderson Ln #304 Austin, TX 78757			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Political Gifts / Fundraising		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F		<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 3/24/23		Payee name La Posada Dining			
Amount (\$) 294.54		Payee address 1000 Zaragoza Laredo TX 78040			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food / Bev. Expense		Description Strategy meeting		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F		<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 3/29/23		Payee name Target			
Amount (\$) 251.84		Payee address 7501 San Dario Laredo TX 78041			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Fundraising / Easter		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule F		<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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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-----------------------------|-------------------------------------|---|
| Advertising Expense | Event Expense | Loan Repayment Reimbursement | State Interim Campaign Expense |
| Accounting/Banking | Fees | Office / Services/Political Expense | Transportation, Equipment & Materials Expense |
| Consulting Expense | Food/Beverage Expense | Printing Expense | Travel In District |
| Contributions/Donations Made By | GR Awards/Memorials Expense | Procuring Expense | Travel Out Of District |
| Candidates/Officerholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |
| Candidate Report | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 4		2 FILER NAME Vanessa Perez		3 Filer ID (Ethics Commission Filers)	
4 Date 4/26/23		5 Payee name Dollar Tree			
6 Amount (\$) 289.57		7 Payee address City State Zip Code 5410 San Bernardo Laredo, TX 78041			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Gifts / Toys		
	(c) <input type="checkbox"/> Check if made outside of Texas. Complete Schedule F		<input type="checkbox"/> Check if used by officer/holder during campaign		
9 Complete ONLY if direct expenditure to benefit COH		Candidate / Officerholder name		Office sought Office held	
Date 4/26/23		Payee name Wal-Mart			
Amount (\$) 220.41		Payee address City State Zip Code 5610 San Bernardo Laredo, TX 78041			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description Food / Bev. / Gifts		
	<input type="checkbox"/> Check if made outside of Texas. Complete Schedule F		<input type="checkbox"/> Check if used by officer/holder during campaign		
Complete ONLY if direct expenditure to benefit COH		Candidate / Officerholder name		Office sought Office held	
Date 4/28/23		Payee name Storage Star			
Amount (\$) 119.74		Payee address City State Zip Code 2110 Quail Creek Rd. Laredo TX 78045			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Rentl Expense		Description Campaign Storage		
	<input type="checkbox"/> Check if made outside of Texas. Complete Schedule F		<input type="checkbox"/> Check if used by officer/holder during campaign		
Complete ONLY if direct expenditure to benefit COH		Candidate / Officerholder name		Office sought Office held	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

- Advertising Expense
- Accounting Bookkeeping
- Consulting Expenses
- Contributions Donations Made by
- Marketeers, Publishers, Political Consultants
- Credit Card Payment
- Filer's Expense
- Fees
- Food/Beverage Expense
- Gifts/Cards/Memorials Expense
- Legal Services
- Loan Payments/Rentals/Leases
- Office/Charitable/Political Expense
- Printing Expense
- Postage/Travel/Transportation
- Public Relations/Advertising Expense
- Public Relations/Political Expense
- Travel Expense
- Travel/Transportation
- Other (leave a category for each other)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1 <u>4</u>	2 FILER NAME <u>Vanessa Perez</u>	3 Filer ID (Ethics Commission Files)
4 Date <u>4/28/23</u>	5 Payee name <u>Sam's Club</u>	
6 Amount (\$) <u>532.75</u>	7 Payee address <u>4810 San Bernardo</u>	City State Zip Code <u>Laredo TX 78041</u>
8 PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule)	
	(b) Description <u>Event Expense Food/Bev./Gifts</u> <u>Day of the Park</u>	
(c) <input type="checkbox"/> Check if never outside of Texas. Complete Schedule F <input type="checkbox"/> Check if outside TX. Complete foreign expense		
9 Complete <u>Only</u> if direct expenditure to benefit C.O.M.	Candidate / Officeholder name	Office sought / Office held
Date <u>6/5/23</u>	Payee name <u>Storage Star</u>	
Amount (\$) <u>64.50</u>	Payee address <u>2110 Quail Creek</u>	
	City State Zip Code <u>Laredo, TX 78045</u>	
PURPOSE OF EXPENDITURE	Category (see Categories listed at the top of this schedule)	
	Description <u>Rental Expense Campaign Storage</u>	
(c) <input type="checkbox"/> Check if never outside of Texas. Complete Schedule F <input type="checkbox"/> Check if outside TX. Complete foreign expense		
Complete <u>Only</u> if direct expenditure to benefit C.O.M.	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	
(c) <input type="checkbox"/> Check if never outside of Texas. Complete Schedule F <input type="checkbox"/> Check if outside TX. Complete foreign expense		
Complete <u>Only</u> if direct expenditure to benefit C.O.M.	Candidate / Officeholder name	Office sought / Office held

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