

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 20
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. Roberto		OFFICE USE ONLY Date Received 2014 OCT 6 PM 3 59 AUSTIN CITY CLERK RECEIVED
	NICKNAME LAST SUFFIX Perez Jr.		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ change of address	ADDRESS / PO BOX: APT / SUITE # CITY: STATE: ZIP CODE 8507 Jamestown Austin TX 78758		Date Hand-delivered or Postmarked
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE (512)	PHONE NUMBER 888-2386	Extension 59
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Brian		Date Imaged
	NICKNAME LAST SUFFIX Almon		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX, PLEASE): APT / SUITE # CITY: STATE: ZIP CODE 9502 Stonebridge Austin TX 78758		
8 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 222-8204	Extension
9 REPORT TYPE	☐ January 15 ☒ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 7 / 1 / 2014 9 / 30 / 2014		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year ☐ Primary ☐ Runoff ☒ General ☐ Special 11 / 4 / 2014		
12 OFFICE	OFFICE HELD (if any) N/A		13 OFFICE SOUGHT (if known) Austin City Council District 4
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME

Roberto Perez Jr.

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM
POLITICAL
COMMITTEE(S)

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

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ N/A

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 3119.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ N/A

4. TOTAL POLITICAL EXPENDITURES

\$ 1,100.70

CONTRIBUTION
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 418.00

OUTSTANDING
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 1,600.06

18 AFFIDAVIT

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Roberto Perez, this the 6th day of October, 20 14, to certify which, witness my hand and seal of office.

Jannette Sue Goodell

Signature of officer administering oath

Jannette Sue Goodell

Printed name of officer administering oath

Notary

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

1 of 9

2 FILER NAME

Roberto Perez Jr

3 ACCOUNT # (Ethics Commission Filers)

4 Date

7/16/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Molly Broadway & Karen Keahey

6 Contributor address: City: State: Zip Code

2011 B Holland Ave.

Austin, TX 78704

7 Amount of contribution (\$)

\$50.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

7/16/14

Full name of contributor

☐ out-of-state PAC (ID#)

Sandra Treviño

Contributor address: City: State: Zip Code

700 Lavaca Suite 1530

Austin TX 78701

Amount of contribution (\$)

\$50.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/16/14

Full name of contributor

☐ out-of-state PAC (ID#)

Luis Sanchez & Alma Santos

Contributor address: City: State: Zip Code

7300 Bennette Ave.

Austin, TX 78752

Amount of contribution (\$)

\$50.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/16/14

Full name of contributor

☐ out-of-state PAC (ID#)

Brian Almon

Contributor address: City: State: Zip Code

9502 Stonebridge Dr.

Austin, TX 78758

Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID#)

Mary E. Milam

Contributor address: City: State: Zip Code

1211 Quail Park Dr.

Austin, TX 78758

Amount of contribution (\$)

\$100.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2 of 9

2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

7/16/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

John A. Green

7 Amount of contribution (\$)

\$20.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

6 Contributor address: City: State: Zip Code

1529 Desert Quail Lane
Austin, TX 78758

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

7/16/14

Full name of contributor

☐ out-of-state PAC (ID#)

Don & Lisa Shepard

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address: City: State: Zip Code

7700 N Lamar Blvd.
Austin, TX 78752

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/16/14

Full name of contributor

☐ out-of-state PAC (ID#)

Chris Fortune

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address: City: State: Zip Code

2116 Ravenscroft Dr.
Austin, TX 78748

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/16/14

Full name of contributor

☐ out-of-state PAC (ID#)

Charise Pollard

Amount of contribution (\$)

\$20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address: City: State: Zip Code

15104 Mossycup Lane.
Austin, TX 78724

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

7/16/14

Full name of contributor

☐ out-of-state PAC (ID#)

Donna Hendricks

Amount of contribution (\$)

\$7.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Contributor address: City: State: Zip Code

7605 Bennett Ave
Austin, TX 78752

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

3 of 9

2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8/1/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Audelia Perez

6 Contributor address: City State Zip Code

1935 Tri Circle Dr.
Firebaugh CA 936227 Amount of
contribution (\$)100⁰⁰

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution
description (if applicable)4x6 Cards
2,000 14 pt
UV Coated

9 Principal occupation / Job title (See Instructions)

Real Estate

10 Employer (See Instructions)

Self Employed

Date

8/21/14

Full name of contributor

☐ out-of-state PAC (ID#)

Alberto and Lydia Baron

Contributor address: City State Zip Code

1365 Cardela, Firebaugh CA 93622

Amount of
contribution (\$)600⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)50 yard Signs
Full color
2 sided

Principal occupation / Job title (See Instructions)

Truck Driver / Qc Manager

Employer (See Instructions)

SC Fuels / Toma-Tek

Date

8/21/14

Full name of contributor

☐ out-of-state PAC (ID#)

Fernando and Maria Garcia

Contributor address: City State Zip Code

2025 Cardela St. Firebaugh CA
93622Amount of
contribution (\$)400⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)10 Signs
36" x 36"
Full color 1 sided

Principal occupation / Job title (See Instructions)

Mechanic

Employer (See Instructions)

IT Machinery

Date

9/3/14

Full name of contributor

☐ out-of-state PAC (ID#)

Audelia Perez

Contributor address: City State Zip Code

1935 Tri Circle Dr. Firebaugh CA
93622Amount of
contribution (\$)250⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)2,000 Stickers
4" x 4"
UV Coated

Principal occupation / Job title (See Instructions)

Real Estate

Employer (See Instructions)

Self Employed

Date

9/26/14

Full name of contributor

☐ out-of-state PAC (ID#)

Daniel and Jackie Ferla

Contributor address: City State Zip Code

1250 Robert S. Light Blvd #10208
Buda, TX 78610Amount of
contribution (\$)700⁰⁰

(If travel outside of Texas, complete Schedule T)

In-kind contribution
description (if applicable)graphic
design - Art
work

Principal occupation / Job title (See Instructions)

Graphic Designer

Employer (See Instructions)

Agility Printing

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/17/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Jennifer Medina

6 Contributor address: City: State: Zip Code

214 Valle de Paz, Firebaugh CA 93622

7 Amount of contribution (\$)

6.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/17/14

Full name of contributor

☐ out-of-state PAC (ID#)

Hazel Serrano

Contributor address: City: State: Zip Code

43070 W McKinley Rd Firebaugh CA 93622

Amount of contribution (\$)

6.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/14

Full name of contributor

☐ out-of-state PAC (ID#)

Evan Morse

Contributor address: City: State: Zip Code

1455 Ramirez Dr. Firebaugh CA 93622

Amount of contribution (\$)

6.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/14

Full name of contributor

☐ out-of-state PAC (ID#)

Kareling Flores

Contributor address: City: State: Zip Code

1770 Ramirez Dr. Firebaugh CA 93622

Amount of contribution (\$)

6.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/14

Full name of contributor

☐ out-of-state PAC (ID#)

Guadalupe Rivera

Contributor address: City: State: Zip Code

1375 Rebeci Dr. Firebaugh CA 93622

Amount of contribution (\$)

6.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

5 of 9

2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/17/14

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Angela Anguiano

6 Contributor address: City: State: Zip Code

1799 Corregidor Ave.
Firebaugh, CA 936227 Amount of
contribution (\$)

\$6.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/17/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Cecilia Perez

Contributor address: City: State: Zip Code

1935 Tri Circle Dr.
Firebaugh, CA 93622Amount of
contribution (\$)

\$27.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Fernando Molina

Contributor address: City: State: Zip Code

1642 N Street
Firebaugh, CA 93622Amount of
contribution (\$)

\$6.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/17/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Milca Perez

Contributor address: City: State: Zip Code

1935 Tri Circle Dr.
Firebaugh, CA 93622Amount of
contribution (\$)

\$26.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

8/14/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Texas Democratic Party

Contributor address: City: State: Zip Code

4818 E. Ben White #104 Austin TX
78741Amount of
contribution (\$)

300.00

In-kind contribution
description (if applicable)voter file
Access

(If travel outside of Texas, complete Schedule T)

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

6 of 9

2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/25/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Maritza Aguirre

6 Contributor address: City: State: Zip Code

551 Municha Ave

Firebaugh, CA 93622

7 Amount of contribution (\$)

\$7.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID#)

Cecilia Perez

Contributor address: City: State: Zip Code

1935 Tri Cirde Dr.

Firebaugh, CA 93622

Amount of contribution (\$)

\$14.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID#)

Milca Perez

Contributor address: City: State: Zip Code

1935 Tri Cirde Dr.

Firebaugh, CA 93622

Amount of contribution (\$)

\$7.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID#)

Sandra Perez

Contributor address: City: State: Zip Code

1935 Tri Cirde Dr.

Firebaugh, CA 93622

Amount of contribution (\$)

\$28.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Contributor address: City: State: Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

7 of 9

2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/25/14

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Noey Garcia

7 Amount of contribution (\$)

\$14.00

8 In-kind contribution description (if applicable)

6 Contributor address: City: State: Zip Code

950 Q Street
Firebaugh, CA 93622

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Brian Lopez

Amount of contribution (\$)

\$7.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

1515 Welty Ave
Firebaugh, CA 93622

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Javier Lopez

Amount of contribution (\$)

\$7.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

7416 Road 7
Firebaugh, CA 93622

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Carlos Rodriguez

Amount of contribution (\$)

\$14.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

28745 Bonnie Way
Firebaugh, CA 93622

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Damian Avila

Amount of contribution (\$)

\$14.00

In-kind contribution description (if applicable)

Contributor address: City: State: Zip Code

2010 Clyde Cannon Rd. Apt. 135
Firebaugh, CA 93622

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

8 of 9

2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/25/14

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Joel Ramirez

6 Contributor address: City: State: Zip Code

3000 Alder Ct.

Firebaugh, CA 93622

7 Amount of contribution (\$)

\$14.00

(If travel outside of Texas, complete Schedule T)

8 In-kind contribution description (if applicable)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Israel Martinez

Contributor address: City: State: Zip Code

1715 N Street Apt. 20

Firebaugh, CA 93622

Amount of contribution (\$)

\$7.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Luis Arias

Contributor address: City: State: Zip Code

1891 Zozaya St.

Firebaugh, CA 93622

Amount of contribution (\$)

\$7.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Tyler Palmer

Contributor address: City: State: Zip Code

12 "O" Street

Firebaugh, CA 93622

Amount of contribution (\$)

\$7.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Jaime Hernandez

Contributor address: City: State: Zip Code

1715 N Street Apt. 6

Firebaugh, CA 93622

Amount of contribution (\$)

\$14.00

(If travel outside of Texas, complete Schedule T)

In-kind contribution description (if applicable)

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 CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

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2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/25/14

5 Full name of contributor

☐ out-of-state PAC (ID# _____)

Laura Davalos

6 Contributor address: City: State: Zip Code

1715 N Street Apt. 1
Firebaugh, CA 936227 Amount of
contribution (\$)

\$14.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Guadalupe Rivera

Contributor address: City: State: Zip Code

1375 Rebecchi Cir
Firebaugh, CA 93622Amount of
contribution (\$)

\$7.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Maria Lopez

Contributor address: City: State: Zip Code

38827 W. Nees Ave
Firebaugh, CA 93622Amount of
contribution (\$)

\$7.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Angela Anguiano

Contributor address: City: State: Zip Code

1799 Corregidor St.
Firebaugh, CA 93622Amount of
contribution (\$)

\$6.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

9/25/14

Full name of contributor

☐ out-of-state PAC (ID# _____)

Andrew Rodriguez

Contributor address: City: State: Zip Code

2097 Zozaya St.
Firebaugh, CA 93622Amount of
contribution (\$)

\$7.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

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.

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Roberto Perez Jr.

3 ACCOUNT # (Ethics Commission Filers)**4**

TOTAL OF UNITEMIZED LOANS:

\$

5 Date of loan

7/9/14

7 Name of lender

Roberto Perez Jr.

☐ out-of-state PAC (ID# _____)**9** Loan Amount (\$)

750.06

6 Is lender
a financial
institution?Y ☒ N**8** Lender address: City: State: Zip Code8507 Jamestown
Austin TX 78758**10** Interest rate

N/A

11 Maturity date

N/A

12 Principal occupation / Job title (See Instructions)

N/A

13 Employer (See Instructions)

N/A

14 Description of Collateral☒ none**15** Check if personal funds were deposited into political account☒**16** GUARANTOR
INFORMATION**17** Name of guarantor**19** Amount Guaranteed (\$)☒ not applicable**18** Guarantor address: City: State: Zip Code**20** Principal Occupation (See Instructions)**21** Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID# _____)

Loan Amount (\$)

Is lender
a financial
institution?

Y N

Lender address: City: State: Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political account

☐GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

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**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1 of 6		2 FILER NAME Roberto Perez Jr.		3 ACCOUNT # (Ethics Commission Filer):	
4 Date 7/1/2014		5 Payee name Facebook			
6 Amount (\$) 10.13		7 Payee address: City: State: Zip Code 1601 Willow Rd Menlo Park, CA 94025			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule): Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T): ☐ 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 7/7/2014		Payee name Ink and Toner			
Amount (\$) 13.98		Payee address: City: State: Zip Code 4981 Irwindale Ave. Ste. 200 Irwindale CA 91706			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule): Printing Expense		Description (If travel outside of Texas, complete Schedule T): ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7/7/2014		Payee name Supplies Outlet.com			
Amount (\$) 87.46		Payee address: City: State: Zip Code 500 Damonte Ranch Parkway #944 Reno NV 89521			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule): Printing Expense		Description (If travel outside of Texas, complete Schedule T): ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7/9/2014		Payee name Bullock Texas State History Museum			
Amount (\$) 8.00		Payee address: City: State: Zip Code 1800 Congress Ave. Austin TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule): Transportation Expense (parking)		Description (If travel outside of Texas, complete Schedule T): ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2 of 6		2 FILER NAME Roberto Perez Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7/16/2014		5 Payee name NationBuilder			
6 Amount (\$) 19.00		7 Payee address: City: State: Zip Code 448 S. Hill St. # 200 Los Angeles CA 90013			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7/18/2014		Payee name Maudie's North Lamar			
Amount (\$) 183.95		Payee address: City: State: Zip Code 10205 N Lamar, Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7/22/14		Payee name USPS			
Amount (\$) 49.00		Payee address: City: State: Zip Code 2883 Texas 71, Del Valle TX 78617			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) other - Stamp/Mail		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 7/31/2014		Payee name Dispora Vote			
Amount (\$) 85.00		Payee address: City: State: Zip Code 916 Rochester Castle Way Pflugerville TX 78660			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3 of 6		2 FILER NAME Roberto Perez Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8/11/2014		5 Payee name Facebook			
6 Amount (\$) 11.10		7 Payee address; City: State: Zip Code 1601 Willow Rd Menlo Park CA 94025			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) ☐ 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 8/18/2014		Payee name Democratic Party			
Amount (\$) 75.00		Payee address; City: State: Zip Code 4818 E. Ben White Blvd # 104, Austin TX 78741			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other - VAN		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/25/14		Payee name Wells Fargo			
Amount (\$) 10.00		Payee address; City: State: Zip Code 9800 N Lamar, Austin TX 78758			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees - Bank		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 8/18/14		Payee name Nation Builder			
Amount (\$) 19.00		Payee address; City: State: Zip Code 448 S. Hill St. #200 Los Angeles CA 90013			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 4 of 6		2 FILER NAME Roberto Perez Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/2/14		5 Payee name Oriental Trading Co.			
6 Amount (\$) 8.78		7 Payee address: City: State: Zip Code P.O Box 2308, Omaha, NE 68103			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/2/14		Payee name Oriental Trading Co.			
Amount (\$) 39.44		Payee address: City: State: Zip Code PO Box 2308 Omaha NE 68103			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/2/14		Payee name Facebook			
Amount (\$) 5.00		Payee address: City: State: Zip Code 1601 Willow Rd, Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/2/14		Payee name Istock International			
Amount (\$) 19.99		Payee address: City: State: Zip Code 1240 20th Ave SE Ste. 200, Calgary Alberta Canada			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) ☐ 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**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F 5 of 6		2 FILER NAME Roberto Perez Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/11/14		5 Payee name USPS			
6 Amount (\$) 15.16		7 Payee address: City: State: Zip Code 8557 Research Blvd Austin TX 78758			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Other - Mailing		(b) Description (If travel outside of Texas, complete Schedule T) ☐ 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 9/11/14		Payee name Austin AFLCIO			
Amount (\$) 145.00		Payee address: City: State: Zip Code PO Box 87 Austin TX 78767			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/16/14		Payee name Nation Builder			
Amount (\$) 19.00		Payee address: City: State: Zip Code 448 S. Hill St 200 Los Angeles CA 90013			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 9/24/14		Payee name Wells Fargo			
Amount (\$) 10.00		Payee address: City: State: Zip Code 9800 N. Lamar, Austin TX 78758			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 6 of 6		2 FILER NAME Roberto Perez Jr.		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 9/29/14		5 Payee name Ink and Toner			
6 Amount (\$) 55.67		7 Payee address: City: State: Zip Code 4981 Irwindale Ave. Ste. 200 Irwindale CA 91706			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) ☐ 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 (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address: City: State: Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address: City: State: Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date		Payee name			
Amount (\$)		Payee address: City: State: Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1 of 2		2 FILER NAME Roberto Perez Jr.		3 ACCOUNT # (Ethics Commission Filer)	
4 Date 7/17/14		5 Payee name Rock n Roll Rentals			
6 Amount (\$) 16.24 ☒ Reimbursement from political contributions intended		7 Payee address: City: State: Zip Code 1420 W Oltorf Austin TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Date 7/15/14		Payee name Office Depot			
Amount (\$) 63.84 ☒ Reimbursement from political contributions intended		Payee address: City: State: Zip Code 2620 W Anderson Ln. Austin TX 78757			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Date 8/25/14		Payee name USPS			
Amount (\$) 9.36 ☒ Reimbursement from political contributions intended		Payee address: City: State: Zip Code Town North Finance Unit Austin TX 78758 9997			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other - Mailing		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	
Date 8/26/14		Payee name USPS			
Amount (\$) 5.80 ☒ Reimbursement from political contributions intended		Payee address: City: State: Zip Code Town North Finance Unit, Austin TX 78758 9997			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other - Mailing		Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 2 of 2	2 FILER NAME Roberto Perez Jr.	3 ACCOUNT # (Ethics Commission Filer)
4 Date 8/16/14	5 Payee name Walmart	
6 Amount (\$) 35.42 ☒ Reimbursement from political contributions intended	7 Payee address: City: State: Zip Code 1036 Norwood Park Blvd, Austin TX 78753	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Event Expense	(b) Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense

Date 9/3/14	Payee name Home Depot	
Amount (\$) 29.40 ☒ Reimbursement from political contributions intended	Payee address: City: State: Zip Code 1200 Barbara Jordan, Austin TX 78723	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense

Date	Payee name	
Amount (\$) ☐ Reimbursement from political contributions intended	Payee address: City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense

Date	Payee name	
Amount (\$) ☐ Reimbursement from political contributions intended	Payee address: City: State: Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense

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