

# 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:  
12

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS/MRS/MR MR FIRST MI  
Alejandro  
NICKNAME LAST SUFFIX  
Pérez Jr

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS  
 change of address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  
2401 Garfield Laredo, TX 78043

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(956) 236-4498

6 CAMPAIGN  
TREASURER  
NAME

MS/MRS/MR MR FIRST MI  
Alejandro  
NICKNAME LAST SUFFIX  
Pérez

7 CAMPAIGN  
TREASURER  
ADDRESS  
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  
1707 Garfield Laredo, Texas 78043

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION  
(956) 722-8613

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  
12 / 11 / 14 THROUGH 12 / 31 / 14

11 ELECTION

ELECTION DATE  
Month Day Year  
/ /  
ELECTION TYPE  
 Primary  Runoff  General  Special

12 OFFICE

OFFICE HELD (if any)  
City Council, Dist. 3

13 OFFICE SOUGHT (if known)

**OFFICE USE ONLY**

Date Received  
2015 JAN 15 PM 5:59  
RECEIVED

Date Hand-delivered or Postmarked

Receipt # Amount

Date Processed

Date Imaged

**GOTO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

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 pages

17 CONTRIBUTION  
TOTALS

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

\$ -

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

\$ 6,250.00

EXPENDITURE  
TOTALS

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

\$ 1,750.00

4. TOTAL POLITICAL EXPENDITURES

\$ 10,969.20

CONTRIBUTION  
BALANCE

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

\$ -

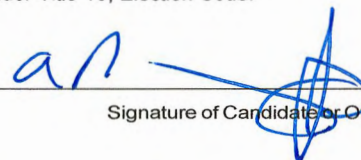
OUTSTANDING  
LOAN TOTALS

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

\$ 3,240.00

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 Alex Perez, this the 15th day of January, 20 15, 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

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>2</u>	
2 FILER NAME <u>Alejandro Perez Jr.</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>12-8-14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>FOAUM CRE LLC</u> <u>BAOKEPAGE</u> 6 Contributor address; City; State; Zip Code <u>10410 MEDICAL LOOP LDO. TX. 78045</u> <u>SUITE 1B</u>	7 Amount of contribution (\$) <u>\$250.00</u>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) <u>Real Estate Co.</u>		10 Employer (See Instructions)	
Date <u>12-10-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>BBVA COMPASS</u> Contributor address; City; State; Zip Code <u>700 San Bernardo</u> <u>Laredo, TX 78040</u>	Amount of contribution (\$) <u>\$300.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Lending Inst.</u>		Employer (See Instructions)	
Date <u>12-10-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>ROBERTO P. MARTINEZ, Jr.</u> Contributor address; City; State; Zip Code <u>P.O. Box 450523 LDO. TX. 78045</u>	Amount of contribution (\$) <u>\$300.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Engineer</u>		Employer (See Instructions)	
Date <u>12-12-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>JAIME A. GONZALEZ, Jr.</u> Contributor address; City; State; Zip Code <u>1500 NORTHGATE LN. MS ALLEN TX 78504</u>	Amount of contribution (\$) <u>\$1,000.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Attorney</u>		Employer (See Instructions)	
Date <u>12-12-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>INTERNATIONAL BUSINESS ADVISORS, LLC.</u> Contributor address; City; State; Zip Code <u>9305 SAN DAVID LDO. TX. 78045</u> <u>SUITE 393</u>	Amount of contribution (\$) <u>\$1,500.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Business Consulting Co.</u>		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: <u>2</u>	
2 FILER NAME <u>Alejandro Perez Jr.</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>12-16-14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>C.M. ZAFFIRINI, ATTORNEY AT LAW</u> 6 Contributor address; City; State; Zip Code <u>1401 WASHINGTON- LDO. TX. P.O. BOX 627</u>	7 Amount of contribution (\$) <u>\$1,000.00</u>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) <u>Attorney</u>		10 Employer (See Instructions)	
Date <u>12-19-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>SOUTH WEBB COUNTY, LTD</u> Contributor address; City; State; Zip Code <u>P.O. BOX 3229 LDO. TX. 78040</u>	Amount of contribution (\$) <u>\$1,000.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Investment Co.</u>		Employer (See Instructions)	
Date <u>12-10-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>ANDREW RAMIREZ</u> Contributor address; City; State; Zip Code <u>10301 RIVER PLAN-AUSTIN . TX. 78747 TATION DR.</u>	Amount of contribution (\$) <u>\$300.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Business Owner</u>		Employer (See Instructions)	
Date <u>12-23-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>BALT RAMOS</u> Contributor address; City; State; Zip Code <u>3502 Winsome Ct Laredo, TX 78045</u>	Amount of contribution (\$) <u>\$600.00</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Business Owner</u>		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	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.

**LOANS**

**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <b>1</b>
2 FILER NAME <i>Alejandro Perez Jr.</i>		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS:    ⇨   ⇨   ⇨   ⇨   ⇨   ⇨		\$ <i>1,000.00</i>
5 Date of loan <i>12-23-14</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) <i>Alejandro Perez</i>	9 Loan Amount (\$) <i>1,000.00</i>
6 Is lender a financial Institution? Y <input type="radio"/> N <input checked="" type="radio"/>	8 Lender address; City; State; Zip Code <i>1707 Garfield Laredo, TX 78043</i>	10 Interest rate —
		11 Maturity date —
12 Principal occupation / Job title (See Instructions) <i>Retired</i>		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor  18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> 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 <input type="checkbox"/> none		Check if personal funds were deposited into political account <input type="checkbox"/>
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor  Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
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	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.

<b>1</b> Total pages Schedule F: 7	<b>2</b> FILER NAME ALEJANDRO PEREZ, Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 12-10-14	<b>5</b> Payee name MGNS
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<b>6</b> Amount (\$) \$420.75	<b>7</b> Payee address; City; State; Zip Code 120 W. Del Mar Blvd. Laredo, Texas 78041
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<b>8</b> 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) Television spots/Advertising for campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-10-14	Payee name Victor Estrada Promotions
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Amount (\$) \$400.00	Payee address; City; State; Zip Code 3816 SUNFLOWER LDO. TX. 78046 AVE.
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) Television & Radio spots/Advertising for campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-12-14	Payee name Victor Estrada Promotions
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3816 SUNFLOWER LDO. TX. 78046
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Television/Radio spots - Advertising for campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-14-14	Payee name JULIO GONZALEZ
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Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 122 PAMPONA LDO. TX. 78046
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Other	Description (If travel outside of Texas, complete Schedule T) Campaign Community Outreach <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY 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

**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.

<b>1</b> Total pages Schedule F: 1	<b>2</b> FILER NAME ALEJANDRO PEREZ, JR.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 12-14-14	<b>5</b> Payee name ANA MARIA GONZALEZ
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<b>6</b> Amount (\$) \$150.00	<b>7</b> Payee address; City; State; Zip Code 2012 McDONALD LDO. TX. 78040
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other	(b) Description (If travel outside of Texas, complete Schedule T) Campaign Community Outreach <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-16-14	Payee name JULIO GONZALEZ
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Amount (\$) \$600.00	Payee address; City; State; Zip Code 122 PAMPONA LDO. TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other	Description (If travel outside of Texas, complete Schedule T) Campaign Community Outreach <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-17-14	Payee name VICTOR ESTRADA PROMOTIONS
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Amount (\$) \$700.00	Payee address; City; State; Zip Code 3816 SUNFLOWER LDO. TX. 78046
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) Television/Radio spots - Advertising for campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-17-14	Payee name VETERAN VOLUNTEERS SERVING THE NEED
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 2012 McDONALD LDO. TX. 78040
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution	Description (If travel outside of Texas, complete Schedule T) Donation made by officeholder <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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

# 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.

<b>1</b> Total pages Schedule F: <i>1</i>	<b>2</b> FILER NAME <i>ALEJANDRO PEREZ, JR.</i>	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date <i>12-18-14</i>	<b>5</b> Payee name <i>PUBLICIDAD MUNDIAL</i>	
<b>6</b> Amount (\$) <i>\$ 200.00</i>	<b>7</b> Payee address; City; State; Zip Code <i>1001 MARKET LDO. TX. 78040</i>	
<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Advertising spot - Campaign</i> <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date <i>12-19-14</i>	Payee name <i>VICTOR ESTRADA PROMOTION</i>	
Amount (\$) <i>\$600.00</i>	Payee address; City; State; Zip Code <i>3816 SUNFLOWER AV. LDO. TX. 78046</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Television/Radio Spots - Advertising for campaign</i> <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
Date <i>12-21-14</i>	Payee name <i>JULIO GONZALEZ</i>	
Amount (\$) <i>\$1,250.00</i>	Payee address; City; State; Zip Code <i>122 PAMPLONA LDO. TX. 78046</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Campaign Community Outreach</i> <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
Date <i>12-22-14</i>	Payee name <i>MARCOS A. ESCAMILLA</i>	
Amount (\$) <i>\$475.00</i>	Payee address; City; State; Zip Code <i>3809 DAFFOLID LDO. TX. 78046</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other</i>	Description (If travel outside of Texas, complete Schedule T) <i>Community Outreach</i> <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

# 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.

<b>1</b> Total pages Schedule F: <u>1</u>		<b>2</b> FILER NAME <u>ALEJANDRO PEREZ, Jr.</u>		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <u>12-22-14</u>		<b>5</b> Payee name <u>GABRIELA CEBALLOS</u>			
<b>6</b> Amount (\$) <u>\$165.00</u>		<b>7</b> Payee address; City; State; Zip Code <u>317 BELAIR LDO. TX. 78041</u>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) <u>Food/Beverage expense</u>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <u>gifts for volunteers (campaign)</u> <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought                      Office held	
Date <u>12-23-14</u>		Payee name <u>FERNANDO SANCHEZ</u>			
Amount (\$) <u>\$700.00</u>		Payee address; City; State; Zip Code <u>10114 CABALLON. LDO. TX. 78045</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Other</u>		Description (If travel outside of Texas, complete Schedule T) <u>Campaign community outreach</u> <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 <u>12-29-14</u>		Payee name <u>IBC</u>			
Amount (\$) <u>35.00</u>		Payee address; City; State; Zip Code <u>1320 Guadalupe street Laredo, TX 78040</u>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <u>Accounting/Banking</u>		Description (If travel outside of Texas, complete Schedule T) <u>Campaign account bank fee</u> <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 (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

# 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.

<b>1</b> Total pages Schedule F: 7	<b>2</b> FILER NAME Alejandro Perez Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 12-11-14	<b>5</b> Payee name Pro Value Medica
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<b>6</b> Amount (\$) 420.00	<b>7</b> Payee address; City; State; Zip Code 1202 E Del Mar Blvd. Ste 104 Laredo, Texas 78041
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<b>8</b> 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) Campaign Brochures <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-12-14	Payee name Danny's 2
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Amount (\$) 68.88	Payee address; City; State; Zip Code 1420 North Malinche Ave. Laredo, Texas 78043
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage expense	Description (If travel outside of Texas, complete Schedule T) Food for campaign blockwalkers <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-15-14	Payee name Eduardo's Mexican Restaurant
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Amount (\$) 51.20	Payee address; City; State; Zip Code 4160 South Zapata Highway Laredo, Texas 78046
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Food/Beverage expense	Description (If travel outside of Texas, complete Schedule T) Food for campaign blockwalkers <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-15-14	Payee name KGN5
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Amount (\$) 646.00	Payee address; City; State; Zip Code 120 W. Del Mar Blvd. Laredo, TX 78041
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) Television spots - Advertising for campaign <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete ONLY 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

**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.

<b>1</b> Total pages Schedule F: 9	<b>2</b> FILER NAME Alejandro Perez Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
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<b>4</b> Date 12-16-14	<b>5</b> Payee name Shop Save Food Store
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<b>6</b> Amount (\$) 61.78	<b>7</b> Payee address; City; State; Zip Code 602 Corpus Christi St. Laredo, Texas 78040
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Transp. & related expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) office holder/campaign travel exp. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-18-14	Payee name Enterprise Rent A Car
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Amount (\$) 215.55	Payee address; City; State; Zip Code 1911 Northeast Bob Bullock Loop Laredo, Texas 78043
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Transp. & related expense	Description (If travel outside of Texas, complete Schedule T) office holder/campaign travel exp. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-19-14	Payee name Interstate Conoco
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Amount (\$) 39.00	Payee address; City; State; Zip Code 3419 San Davia Laredo, Texas 78040
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Transp. & related expense	Description (If travel outside of Texas, complete Schedule T) office holder/campaign travel exp. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 12-19-14	Payee name Pro Value Media
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Amount (\$) 555.32	Payee address; City; State; Zip Code 1202 E Dri Mar Blvd Laredo, Texas 78041
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<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign brochures <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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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**

# 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.

<b>1</b> Total pages Schedule F: 7	<b>2</b> FILER NAME Alejandro Perez Jr.	<b>3</b> ACCOUNT # (Ethics Commission Filers)
<b>4</b> Date 12-22-14	<b>5</b> Payee name HEB	
<b>6</b> Amount (\$) 75.72	<b>7</b> Payee address; City; State; Zip Code 1300 Guadalupe St. Laredo, Texas 78040	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See categories listed at the top of this schedule) Food/Beverage exp.	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) Food for campaign volunteers <input type="checkbox"/> Check if Austin, TX, officeholder living expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 12-23-14	Payee name IBC	
Amount (\$) 10.00	Payee address; City; State; Zip Code 1320 Guadalupe Street Laredo, Texas 78040	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Accounting/Banking	Description (If travel outside of Texas, complete Schedule T) Campaign account bank fee <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 12-23-14	Payee name KENS	
Amount (\$) 280.00	Payee address; City; State; Zip Code 120 W. Del Mar Blvd. Laredo, TX 78041	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) Television spots - Advertising for campaign <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 12-26-14	Payee name Cinemark	
Amount (\$) 140.00	Payee address; City; State; Zip Code 5412 San Bernardo Laredo, Texas 78041	
<b>PURPOSE OF EXPENDITURE</b>	Category (See categories listed at the top of this schedule) Gift/Awards expense	Description (If travel outside of Texas, complete Schedule T) Gifts for campaign volunteers <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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