

CAND DATE / OFFICEHOLDER
CAMPA GN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

Filer ID

Total pages filed:

3	CANDIDATE / OFFICEHOLDER NAME	MS / MR	FIRST Lynette <i>Veronica</i>	MI	OFFICE USE ONLY
					Date Received
	NICKNAME	LAST Perez	SUFFIX		
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY;	ZIP CODE	Date Hand-delivered or Date Postmarked	Receipt # Amount
	Change of Address	9719 Voir Dire Converse, TX 78109	<i>8310 Brookline, Universal City, TX 78148</i>		<i>78148</i>
				Date Processed	
5	CAMPAIGN TREASURER NAME	MS / MR	MI		
	NICKNAME		SUFFIX		
6	CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE; ZIP CODE
	(Residence or Business)				
7	CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
8	REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer

SUBTOTALS - C/OH

18 FILER NAME

19 Filer ID

[REDACTED]

20 SCHEDULE SUBTOTALS

NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 500.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4. <input type="checkbox"/> SCHEDULE E: LOANS	\$
5. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 110.65
6. <input type="checkbox"/> SCHEDULE F2: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	
[REDACTED]	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 1/1 Rpt: 4/6

2 FILER NAME
Perez, Lynette

3 Filer ID

4 Date 5 Full name of contributor out-of-state PAC (ID#: _____)
05/13/2019 McRae, Ieland

7 Amount of Contribution (\$) \$500.00

6 Contributor address; City; State; Zip Code
17710 Hillsedge

San Antonio, TX 78257

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)
Self Employed

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense
Fees
Food/Beverage Expense

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID

Sch: 1/2 Rpt: 5/6 Perez, Lynette

4 Date Payee name
05/02/2019 CAMPAIGN PARTNER

6 Amount (\$) 7 Payee address: City State Zip Code

Fitchburg, MA 01420

8 PURPOSE OF EXPENDITURE (b) Description

Website

9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held

expenditure to benefit C/OH

Date 05/31/2019 Frost Bank Service Charge

Amount (\$) Payee address: City State Zip Code

\$9.00 100 W. Houston St

San Antonio, TX 78205

PURPOSE OF EXPENDITURE Consulting Expense Polling Expense (b) Description Travel in District

Bank Fee

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense

Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The instruction guide explains how to complete this form.

Sch: 2/2 Rpt: 6/6

Perez, Lynette

4 Date

05/13/2019

5 Payee name

Stripe Transfer

6 Amount (\$)

\$14.80

7 Payee address; City; State; Zip Code

185 Berry St
Ste 550
San Francisco, CA 94107

8 PURPOSE OF EXPENDITURE