Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

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: 50

OFFICE USE ONLY

Date Received

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE: Councilman FIRST: Bobby MI:

NICKNAME: LAST: Perez SUFFIX:

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX: PO Box APT / SUITE #: 5344 CITY: San Antonio STATE: TX ZIP CODE: 78201

5 CAMPAIGN TREASURER NAME

TITLE: FIRST: Kevin MI:

NICKNAME: LAST: Messenger SUFFIX:

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE): 3481 Fredericksburg Rd. APT / SUITE #: Suite 1 CITY: San Antonio STATE: TX ZIP CODE: 78201

7 CAMPAIGN TREASURER PHONE

AREA CODE: (210) PHONE NUMBER: 938 4946 EXTENSION:

8 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)

9 PERIOD COVERED

Month Day Year: 1/1/02 THROUGH Month Day Year: 6/30/02

10 ELECTION

ELECTION DATE Month Day Year: / NA

ELECTION TYPE: NA ☐ Primary ☐ Runoff ☐ General ☐ Special

11 OFFICE

OFFICE HELD (if any): City Council Dist. 1

12 OFFICE SOUGHT (if known): N/A

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

-- Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. --

Name: N/A

Address / PO Box; Apt. / Suite #; City; State; Zip Code: N/A

☐ additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Bobby Perez

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

** This box is for notice of political expenditures 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: NA

COMMITTEE ADDRESS: NA

COMMITTEE CAMPAIGN TREASURER NAME: NA

COMMITTEE CAMPAIGN TREASURER ADDRESS: NA

☐ additional pages

RECEIVED 2002 JUL 15 PM 1:29 CITY OF SAN ANTONIO CITY CLERK

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 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)	$ 29,635
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ —
	4. **TOTAL POLITICAL EXPENDITURES**	$ 22,937.42
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ —

19 AFFIDAVIT

DAWN RENEE VALLERY
NOTARY PUBLIC
STATE OF TEXAS
My Comm. Exp. 01-28-2006

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 Bobby Perez, this the 15th day of July, 20 02, to certify which, witness my hand and seal of office.

Dawn Renee Vallery	Dawn Renee Vallery	Notary Public
Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 1/14

2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/13/02	CHARLES E. AMATO 9311 SAN PEDRO APT 6000 SAN ANTONIO, TX 78216	$250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
2/16/02	JAMES G LIESHUTZ 215 W. TRAVIS SAN ANTONIO, TX 78205	$250.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/13/02	RICHARD OR KATHY GARZA 8407 WICKERSHAM SAN ANTONIO, TX 78250	$100.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/13/02	JEFREY ROCHELLE 505 ARCADIA PL SAN ANTONIO, TX 78209	250.00	

Principal occupation (Optional) | Employer (Optional)

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)
	J.A. CAPPELLI 347 WILKENS AVE SAN ANTONIO, TX 78210	10.00	

Principal occupation (Optional) | Employer (Optional)

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1: 2/14

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/13/02	Kelsey Menzel 2414 Clower San Antonio, TX 78201	$100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/13/02	RABA-KISTNER P.A.C. PO BX 690287 San Antonio, TX 78269	$500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/13/02	Jesse H. Oppenheimer 711 Navarro San Antonio, TX 78205	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/15/02	Wayne Harwell PO Bx. 77065 San Antonio, TX 78201	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/15/02	Goode Casseb Jones Riklin Choate & Watson P.O. Bx 120490 San Antonio, TX 78212	500.00	

Principal occupation (Optional) | Employer (Optional)

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(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 3/14

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/13/02	ROBERT P BRAUBACH 1035 S. ST. MARYS SAN ANTONIO, TX 78205	$250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/13/02	STEVE OR ELLEN GIUSI 923 S. ALAMO, No3 SAN ANTONIO, TX 78205	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/13/02	E.P. WALLER JR, DDS 172 EL CERRITO SAN ANTONIO, TX 78232	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/15/02	EUGENE H. DAWSON, JR 208 N. TOWER DR SAN ANTONIO, TX 78232	1000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/15/02	PATRICK J OR JOAN R KENNEDY 112 E PECAN, ST 2810 SAN ANTONIO, TX 78205	$1,000.00	

Principal occupation (Optional) | Employer (Optional)

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1 Total pages this Schedule A1: 4/14

2 FILER NAME: BOBBY PÉREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/15/02	STEPHEN L OR MARTHA HIXON 114 RIO BRAVO SAN ANTONIO, TX 78232	$500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
2/14/02	PAT MALONEY JR 239 E COMMERCE SAN ANTONIO, TX 78205	$1,000.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/18/02	DAVID P OR KATHRYN A STANUSH 1451 OLD BOERNE RD BULVERDE, TX 78163	$50.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/16/02	ARTEMIO JOEL OR MARTHA P RAMIREZ 12723 VILLA MADERO SAN ANTONIO, TX 78233	$50.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/14/02	TOM E PAWEL 123 GENESEO RD SAN ANTONIO, TX 78209	$250.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 5/4

2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/20/02	INTEGRATED REALTY GROUP 11202 DISCO DR SAN ANTONIO, TX 78216	$250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	GERALD R OR SANDRA ARREDONDO 10406 LAZY F TRAIL HELOTES, TX 78023	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	JIMMY JIMENEZ 4026 GLEN ROCK SAN ANTONIO, TX 78240	$300.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	ANGEL JOSE GONZALEZ II 301 ENCINO AVE SAN ANTONIO, TX 78209	$500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	THOMAS M GIAMBOI 3312 BRYKER DR AUSTIN, TX 78703	$500.00	

Principal occupation (Optional) | Employer (Optional)

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1 Total pages this Schedule A1: 6/14

2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/18/02	ANDREW A SCHATTE 2211 NORTH FOLK HOUSTON TX 77098	$1,000.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
2/15/02	ELIZABETH A COPELAND DR. BRADLEY S. WILDER 18906 WINDSOR RD SAN ANTONIO, TX 78259	$50.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/20/02	J TULLOS WELLS 800 ONE ALAMO CENTER SAN ANTONIO, TX	$200.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/20/02	ERNEST W BROMLEY 104 E ELSMERE SAN ANTONIO, TX 78212	$750.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/15/02	N.D. KALMIN, M.D. 35 WEST ELM CIRCLE SAN ANTONIO TX 78230	$250.00	

Principal occupation (Optional) | Employer (Optional)

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1 Total pages this Schedule A1: 7/14

2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/19/02	RICK OR LISA SHELDON 4006 GREEN OAK DR WACO, TX 76710	$ 1,000.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	SUREN KAMATH 3115 IRON STONE LN SAN ANTONIO, TX 78230	$ 500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/00	FRANCISCO J VELASQUEZ 206 HONEYSUCKLE SAN ANTONIO TX 78213	$ 200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	PAT HANCOCK 310 S. ST MARYS STE 1500 SAN ANTONIO, TX 78205	$ 500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/19/02	BERNAR PLIFSHUTS 215 W TRAVIS SAN ANTONIO, TX 78205	$ 100.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/20/02	EARL & BROWN P.C. 111 SOLEDAD, STE 1111 SAN ANTONIO, TX 78205	$1,000.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
2/20/02	SAN ANTONIO FIRE FIGHTERS PAC 8925 WEST I-10 SAN ANTONIO, 78230	$1,000.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/19/02	MARTIN, DROUGHT & TORRES 300 CONVENT SAN ANTONIO, TX 78205	$500.00	

Principal occupation (Optional) | Employer (Optional)

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)
2/18/02	BROCK & PERSONS 10101 REUNION PLACE SAN ANTONIO, TX 78216	$1,000.00	

Principal occupation (Optional) | Employer (Optional)

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)
4/20/02	ROBERTO S VARGAS 800 DOLOROSA, STE 105 SAN ANTONIO, TX 78207	$200.00	

Principal occupation (Optional) | Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

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1 Total pages this Schedule A1: 9/14

2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/20/02	LORETTA BEHRENS DENNIS D. BEHRENS 142 E ELSMERE SAN ANTONIO TX 78212	$ 200.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	LOEFFLER, JONAS & TUGGEY, LLP 755 E MULBERRY Ste 200 SAN ANTONIO TX 78212	$ 500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/22/02	GENE POWELL 11 LYNN BATS LN, STE 100 SAN ANTONIO TX 78218	$ 1,000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/21/02	3 D/1 PAC 1900 WEST LOOP SOUTH STE 600 SAN ANTONIO TX 77027	$ 250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	BILL KAUFMAN LINDA KAUFMAN 100 WEST HOUSTON ST SAN ANTONIO TX 78205	$ 1,000.00	

Principal occupation (Optional) | Employer (Optional)

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1 Total pages this Schedule A1: 10/14

2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/21/02	S BRAD OR LAUREN DAVIS 11434 WHISPER DAWN SAN ANTONIO, TX	$ 500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/21/02	FULLBRIGHT & JAWORSKI LLP TEX COMMITTEE 1301 McKINNEY, STE 5100 HOUSTON, TX 77010	$ 500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/25/02	MR & MRS PETER M. HOLT 2191 LITTLE BLANCO RD BLANCO, TX 78606	$ 1,000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/19/02	THOMAS G YANTIS 14 DEZAVALA PL SAN ANTONIO, TX 78231	$ 500.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/22/02	ELLIOT STONE 13155 KEYSTONE TERRACE N. MIAMI, FL 33181	$ 150.00	

Principal occupation (Optional) | Employer (Optional)

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2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/22/02	DANIEL B. MARKSON 2421 LAKE PANCOAST APT 15 MIAMI BEACH, FL 33140	$150.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/24/02	ALFONSO CHISCANO MD 15243 PEBBLE COVE SAN ANTONIO, TX 78232	100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/22/02	JERRY W COBB 6114 AUTUMN DR HOUSTON, TX 77092	$300.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/25/02	MARY ELLEN O'NEILL 16919 SPRINGHILL SAN ANTONIO, TX 78232	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/22/22	RON L BOWEN 11203 HUNTERS PATH	$100.00	

Principal occupation (Optional) | Employer (Optional)

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

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 12/14

2 FILER NAME: BOBBY PEREZ

3 ACCOUNT # (Ethics Commission filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/27/02	B. J. McCOMBS POBX BH003 SAN ANTONIO, TX 78201	$ 1,000 00	

9 Principal occupation (Optional):

10 Employer (Optional):

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)
3/5/02	CARL PIPOLY 205 W OLMOS DR STE 105 SAN ANTONIO, TX 78212	$ 25 00	

Principal occupation (Optional):

Employer (Optional):

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)
2/28/02	LINDOW & TREAT, LLP 112 E PECAN, Ste 2300 SAN ANTONIO, TX 78205	$ 500 00	

Principal occupation (Optional):

Employer (Optional):

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)
3/7/02	RUDY VASQUEZ, PC 1610 BROADWAY SAN ANTONIO TX 78215	$ 100 00	

Principal occupation (Optional):

Employer (Optional):

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)
3/8/02	MICHAEL A SEGER, MD 1909 ALBANY AVE LUBBOCK, TX 79407	$ 100 00	

Principal occupation (Optional):

Employer (Optional):

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 13/14

2 FILER NAME: BOBBY PÉREZ

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/18/02	HEARD, LINEBARGER, GRAHAM, PENA & SANDERSON LLP 711 NAVARRO, STE 300 SAN ANTONIO, TX	$1,000.00	

9 Principal occupation (Optional)

10 Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/27/02	G W WORTH 6929 CAMP BULLIS RD SAN ANTONIO, TX 78256	$1,000.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/27/02	ROY R & RILA ROSIN 159 SWEETBRUSH SAN ANTONIO, TX 78239	$100.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4/30/02	S.A. POLICE OFFICERS ASSOC. PAC 1939 N E LOOP 410 SAN ANTONIO, TX 78217	$500.00	

Principal occupation (Optional)

Employer (Optional)

Date	Full name of contributor / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2/20/02	CARL E. BROWN P.C 111 Soledad #1111 San Antonio, TX 78205	$1000.00	

Principal occupation (Optional)

Employer (Optional)

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 14/14

2 FILER NAME Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2/20/02	Bill Kauffman 1250 Frost Bank Tower San Antonio TX 78205	$1000.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

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)
2/21/02	Brad Davis 11434 Whisper Dawn San Antonio, TX 78230	$500.00	

Principal occupation (Optional) | Employer (Optional)

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)

Principal occupation (Optional) | Employer (Optional)

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)

Principal occupation (Optional) | Employer (Optional)

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)

Principal occupation (Optional) | Employer (Optional)

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POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 1/15

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/8/02	~~Ron Herndon~~ Harolds Framing Shop 2743 Roosevelt San Antonio, TX 78214	$80.00

8 Purpose of payment (See instructions regarding type of information required.): Fundraising Gift for Event

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/18/02	City of San Antonio Main Plaza San Antonio, TX 78205	$44.66

Purpose of payment (See instructions regarding type of information required.): Telephone Expense

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/18/02	Thomas Aguillon Main Plaza San Antonio, TX 78205	$129.23

Purpose of payment (See instructions regarding type of information required.): Services Rendered

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/21/02	Joaquin Castro Campaign 300 Convent St #1500 San Antonio, TX 78205	500.00

Purpose of payment (See instructions regarding type of information required.): Contribution

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 2/18

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/23/02	Roger Perez Campaign 1806 McCullough Ave. San Antonio, TX 78212	$500.00

8 Purpose of payment (See instructions regarding type of information required.): Contribution

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/23/02	Mario Salas Campaign 4122 Sunrise Point San Antonio, TX 78244	750.00

Purpose of payment (See instructions regarding type of information required.): Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/24/02	Exxon Mobil Gas Station San Pedro Ave San Antonio, TX 78212	$8.07

Purpose of payment (See instructions regarding type of information required.): Fuel

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/24/02	David Rodriguez Campaign 601 NW. Loop 410 San Antonio, TX 78216	500.00

Purpose of payment (See instructions regarding type of information required.): Contribution (Business Expense)

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 3/15

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
1/24/02	Palm Restaurant 205 E. Houston St San Antonio, TX	400.00

8 Purpose of payment (See instructions regarding type of information required.): Gifts to City 1 Staff (4)

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/24/02	Comp USA Passo Rd San Antonio TX 78209	169.33

Purpose of payment (See instructions regarding type of information required.): Computer Supplies & Equipment

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/28/02	Frank Sierra Campaign 111 Osage Dr San Antonio, TX 78207	$300.00

Purpose of payment (See instructions regarding type of information required.): Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
1/30/02	Westside YMCA 24th St. San Antonio, TX 78207	150.00

Purpose of payment (See instructions regarding type of information required.): Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 4/15

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/1/02	Raul Prado Campaign 215 McCarty Dr San Antonio, TX 78211	500.00

8 Purpose of payment (See instructions regarding type of information required.): Contribution

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/1/02	Holy Family Senior Citizens 152 Florencia San Antonio, TX 78228	$100.00

Purpose of payment (See instructions regarding type of information required.): Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/9/02	Election Support Services 4958 West Military Dr. San Antonio, TX 78242	$250.00

Purpose of payment (See instructions regarding type of information required.): Phone Banking Services/Roger Perez

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/13/02	Shelton & Valadez 112 E. Pecan #2600 San Antonio, TX 78205	$500.00

Purpose of payment (See instructions regarding type of information required.): Payment for Fundraiser Event (Miss Queen)

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 5/15

2 FILER NAME Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/18/02	Palm Restaurant 325 E. Houston St San Antonio, TX 78205	116.98

8 Purpose of payment (See instructions regarding type of information required.): Expenses for Staff Event

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/18/02	Budget Rental Car El Paso, TX	361.76

Purpose of payment (See instructions regarding type of information required.): Travel Expense to El Paso TX

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/22/02	City of San Antonio Main Plaza San Antonio 78205	113.21

Purpose of payment (See instructions regarding type of information required.): Telephone Expenses

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/22/02	Robert Garza Campaign 3027 NAVARRO San Antonio TX 78207	1000.00

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 6/15

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
2/26/02	Melissa Coulter 2826 Vance Jackson San Antonio, TX 78201	$100.00

8 Purpose of payment (See instructions regarding type of information required.): Services Rendered

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
2/25/02	Tony Cardenas Campaign Los Angeles, Calif	$500.00

Purpose of payment (See instructions regarding type of information required.): Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/1/02	Frank Sierra Campaign 111 Sage Dr. San Antonio, TX ~~78205~~ 78207	$75.00

Purpose of payment (See instructions regarding type of information required.): Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/4/02	Election Support Services 4458 West Military Drive San Antonio, TX 78242	$075.00

Purpose of payment (See instructions regarding type of information required.): Phone banking services rendered

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 7/15

2 FILER NAME Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/3/02	Rendon Photography 254 Allenworth ~~Houston~~ San Antonio TX 78209	48.54

8 Purpose of payment (See instructions regarding type of information required.): Photography Services

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/6/02	Mario Salas Campaign 4122 Sunrise Point San Antonio, TX 78244	$300.00

Purpose of payment (See instructions regarding type of information required.): Contribution

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/7/02	Inocente Aguarero San Antonio, TX	$100.00

Purpose of payment (See instructions regarding type of information required.): Contribution to High School Award Trip

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/15/02	Alice Salas 462 Mary Louise San Antonio, TX 78201	$500.00

Purpose of payment (See instructions regarding type of information required.): Wedding Expenses for Constituent (Aguillion)

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 8/15

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/19/02	Melissa Christian Campaign 300 Dolorosa San Antonio, TX 78205	$1000.00

8 Purpose of payment (See instructions regarding type of information required.): Contribution

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/18/02	Election Support Services 4958 West Military Dr San Antonio, TX 78242	$1075.00

Purpose of payment (See instructions regarding type of information required.): Phone Banking Services

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/18/02	Wade Shelton Campaign 112 E. Pecan 2600 San Antonio, TX 78205	$1000.00

Purpose of payment (See instructions regarding type of information required.): Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/18/02	City of San Antonio Main Plaza San Antonio, TX 78205	$90.50

Purpose of payment (See instructions regarding type of information required.): Event Tickets/Contribution

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 9/15

2 FILER NAME: Bobby Perry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
3/18/02	Comp USA Basse Rd. San Antonio, TX 78209	116.46

8 Purpose of payment (See instructions regarding type of information required.): Computer Supplies / Equipment

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/18/02	Doubletree Hotel Houston, TX	141.98

Purpose of payment (See instructions regarding type of information required.): National League of Cities Lodging

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/19/02	Maxton Printers 814 N. Alamo San Antonio, TX 78205	305.00

Purpose of payment (See instructions regarding type of information required.): Printing Expenses

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
3/19/02	City San Antonio Main Plaza San Antonio, TX 78205	$237.00 $125.00

Purpose of payment (See instructions regarding type of information required.): Event Ticket Contribution.

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 10/15

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
4/17/02	Lisa Juarez Main Plaza San Antonio, TX 78205	126.00

8 Purpose of payment (See instructions regarding type of information required.): Fiesta Event Tickets Donations

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/23/02	Fiesta Commission Broadway Ave San Antonio, TX 78205	210.00

Purpose of payment (See instructions regarding type of information required.): Fiesta Event Tickets Donations

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/30/02	Comp USA Basse Rd San Antonio, TX 78209	800.00

Purpose of payment (See instructions regarding type of information required.): Computer Equipment Replacement

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
4/30/02	Drury Inn So. St Mary St San Antonio, Texas	250.34

Purpose of payment (See instructions regarding type of information required.): Lodging Expenses.

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 11/15

2 FILER NAME: Bobby Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/7/02	Charlie Connor Campaign 13306 Hunters Hollow San Antonio, TX 78230	500.00

8 Purpose of payment (See instructions regarding type of information required.): Contribution

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

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Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/6/02	City of San Antonio Main Plaza San Antonio, TX 78206	13.52

Purpose of payment (See instructions regarding type of information required.): Telephone Expense

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/13/02	La Kiokie Bequet San Antonio, TX 78209	44.95

Purpose of payment (See instructions regarding type of information required.): Donation

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/13/02	City of San Antonio Main Plaza San Antonio, TX 78206	480.00

Purpose of payment (See instructions regarding type of information required.): Event Tickets

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 12/15

2 FILER NAME: Rickly Perez

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/20/02	Home Depot Sunset San Antonio, TX 78209	343.86

8 Purpose of payment (See instructions regarding type of information required.): Supplies/Materials

9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/18/02	Hispanic Elected Officials Org.	35.00

Purpose of payment (See instructions regarding type of information required.): Membership Dues

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/18/02	City of San Antonio Main Plaza, San Antonio, TX 78205	82.30

Purpose of payment (See instructions regarding type of information required.): Telephone Expenses

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/21/02	John Sharp Campaign Austin, TX	$500.00

Purpose of payment (See instructions regarding type of information required.): Contribution.

-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name | Office sought | Office held

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Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 13/15

2 FILER NAME: Bobby Perry

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
5/27	Alice Salas 462 Mary Louise San Antonio, TX 78201	60.00

8 Purpose of payment (See instructions regarding type of information required.): Purchase of Cake for Event

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

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Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
5/21/02	Leslie Brown Campaign 1249 Wiltshire San Antonio, TX	1500.00

Purpose of payment (See instructions regarding type of information required.): Contribution

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6/6/02	Leticia Van DePutte Campaign 3718 Blanco Rd, Suite #2 San Antonio, TX 78212	$500.00

Purpose of payment (See instructions regarding type of information required.): Contribution

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6/10/02	Comp USA Basse Rd San Antonio, TX 78205	81.96

Purpose of payment (See instructions regarding type of information required.): Computer Equipment & Supplies

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 14/15

2 FILER NAME: Bobby Reny

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
6/10/02	Home Depot Sunset San Antonio, TX 78209	226.19

8 Purpose of payment (See instructions regarding type of information required.): Materials / Supplies

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

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Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6/10/02	Margarita Man 10818 Gulfdale San Antonio, TX 78216	193.10

Purpose of payment (See instructions regarding type of information required.): Event Supplies Donation

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
6/26/02	Raul Prado Campaign 215 McLaughlin San Antonio, TX 78211	$500.00

Purpose of payment (See instructions regarding type of information required.): Contribution

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name | Office sought | Office held

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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: ~~14/14~~ 15/15

2 FILER NAME

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address; City; State; Zip Code	7 Amount ($)
7/10/02	United Way San Antonio, TX	250.00

8 Purpose of payment (See instructions regarding type of information required.)

Event Tickets Donation

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)
7/10/02	Marcel S Peney 56 Vaughan San Antonio TX 78201	202.16

Purpose of payment (See instructions regarding type of information required.)

[illegible] Services Rendered

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address; City; State; Zip Code	Amount ($)

Purpose of payment (See instructions regarding type of information required.)

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

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