

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 16								
3 CANDIDATE / OFFICEHOLDER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR Mr</div> <div>FIRST Plácido</div> <div>MI A</div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST Gómez</div> <div>SUFFIX</div> </div>	<div style="border: 1px solid black; padding: 5px; text-align: center;">OFFICE USE ONLY</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Received JUL 14 2023</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Hand-delivered or Date Postmarked</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <div>Receipt #</div> <div>Amount \$</div> </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Processed</div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Date Imaged</div>									
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	<div style="display: flex; justify-content: space-between;"> <div>ADDRESS / PO BOX;</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> 4018 Gibson St, Houston, TX, 77007										
5 CANDIDATE/ OFFICEHOLDER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE (505)</div> <div>PHONE NUMBER 426-7779</div> <div>EXTENSION</div> </div>										
6 CAMPAIGN TREASURER NAME	<div style="display: flex; justify-content: space-between;"> <div>MS / MRS / MR Mr</div> <div>FIRST Rolaund</div> <div>MI</div> </div> <hr style="border-top: 1px dotted black;"/> <div style="display: flex; justify-content: space-between;"> <div>NICKNAME</div> <div>LAST Hinojosa</div> <div>SUFFIX</div> </div>										
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	<div style="display: flex; justify-content: space-between;"> <div>STREET ADDRESS (NO PO BOX PLEASE);</div> <div>APT / SUITE #;</div> <div>CITY;</div> <div>STATE;</div> <div>ZIP CODE</div> </div> 515 Memorial Heights Dr, Houston, TX, 77007										
8 CAMPAIGN TREASURER PHONE	<div style="display: flex; justify-content: space-between;"> <div>AREA CODE (713)</div> <div>PHONE NUMBER 907-4579</div> <div>EXTENSION</div> </div>										
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input checked="" type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>										
10 PERIOD COVERED	<div style="display: flex; justify-content: space-between;"> <div> Month Day Year 6 / 12 / 23 </div> <div>THROUGH</div> <div> Month Day Year 6 / 30 / 23 </div> </div>										
11 ELECTION	<div style="display: flex; justify-content: space-between;"> <div> ELECTION DATE Month Day Year 11 / 7 / 23 </div> <div> ELECTION TYPE <div style="display: flex; justify-content: space-between;"> <div>Primary</div> <div>Runoff</div> <div>Other Description</div> </div> <div style="display: flex; justify-content: space-between;"> <div><input checked="" type="checkbox"/> General</div> <div><input type="checkbox"/> Special</div> <div></div> </div> </div> </div>										
12 OFFICE	<div style="display: flex; justify-content: space-between;"> <div>OFFICE HELD (if any)</div> <div>13 OFFICE SOUGHT (if known) HISD Trustee District VIII</div> </div>										
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	<div style="border: 1px solid black; padding: 5px;"> <p>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.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td>GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td>SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table> </div>			COMMITTEE TYPE	COMMITTEE NAME	GENERAL	COMMITTEE ADDRESS	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS
COMMITTEE TYPE	COMMITTEE NAME										
GENERAL	COMMITTEE ADDRESS										
SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME										
	COMMITTEE CAMPAIGN TREASURER ADDRESS										

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

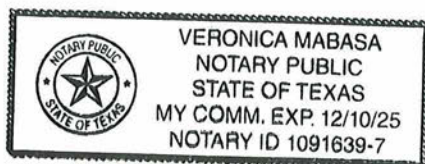
15 C/OH NAME Plácido Andrés Gómez		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,685.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 342.15
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8,342.85
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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

Plácido Gómez
Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit



NOTARY STAMP / SEAL

Sworn to and subscribed before me by Plácido Gomez this the 14th day of July, 2023, to certify which, witness my hand and seal of office.

Veronica Mabasa Veronica Mabasa Team Lead
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

OR

(2) Unsworn Declaration

My name is Plácido Gómez, and my date of birth is May 19, 1991.
My address is 4018 Gibson St, Houston, TX, 77007, USA.
(street) (city) (state) (zip code) (country)
Executed in Harris County, State of Texas, on the 14 day of July, 2023.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME****Plácido Andrés Gómez****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 8,685.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0.00
4.	SCHEDULE E: LOANS	\$ 0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 250.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 92.15
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0.00

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/20/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Karthik Soora 6 Contributor address; City; State; Zip Code Houston, TX, 77007	7 Amount of contribution (\$) 250.00
8 Principal occupation / Job title (See Instructions) Renewable Energy		9 Employer (See Instructions) Pattern Energy
Date 06/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Andrew Walchuk Contributor address; City; State; Zip Code Washington, DC, 20009	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) United States Department of Justice
Date 06/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Myles Bugbee Contributor address; City; State; Zip Code Washington, DC, 20005	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) AL Media
Date 06/20/2023	Full name of contributor out-of-state PAC (ID#: _____) Rebecca Bond Contributor address; City; State; Zip Code San Francisco, CA, 94110	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Organizer		Employer (See Instructions) Self-Employed
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/20/2023	5 Full name of contributor out-of-state PAC (ID#: Alexander Karjeker 6 Contributor address; City; State; Zip Code Brooklyn, NY, 11238	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Data Scientist		9 Employer (See Instructions) WhatsApp Inc
Date 06/21/2023	Full name of contributor out-of-state PAC (ID#: Jerrell Miller Contributor address; City; State; Zip Code Dallas, TX, 75204	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Katten Muchin Rosenman
Date 06/22/2023	Full name of contributor out-of-state PAC (ID#: Victoria Gomez Contributor address; City; State; Zip Code Alamosa, CO, 81101	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions) Indiana University
Date 06/23/2023	Full name of contributor out-of-state PAC (ID#: Fernanda Pierre Contributor address; City; State; Zip Code Houston, TX, 77041	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Spring Branch ISD
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/23/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Gary Miller 6 Contributor address; City; State; Zip Code Jersey City, NJ, 07306	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Enerst & Young
Date 06/25/2023	Full name of contributor out-of-state PAC (ID#: _____) Dr Michelle Cantú-Wilson Contributor address; City; State; Zip Code Pearland, TX, 77089	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Leadership Consultant		Employer (See Instructions) Self-Employed
Date 06/25/2023	Full name of contributor out-of-state PAC (ID#: _____) Shamsa Mangalji Contributor address; City; State; Zip Code Houston, TX, 77021	Amount of contribution (\$) 30.00
Principal occupation / Job title (See Instructions) Director of Development		Employer (See Instructions) Connect Community
Date 06/25/2023	Full name of contributor out-of-state PAC (ID#: _____) Danielle Deckard Contributor address; City; State; Zip Code TX, 78666	Amount of contribution (\$) 50.00
Principal occupation / Job title (See Instructions) Program Director		Employer (See Instructions) Texas Majority PAC
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/25/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Katherine Fischer 6 Contributor address; City; State; Zip Code Houston, TX, 77030	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Texas Majority PAC
Date 06/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Wendy Castillo Contributor address; City; State; Zip Code Maywood, NJ, 07607	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Researcher		Employer (See Instructions) Bridgespan Group
Date 06/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Marcus Cenicerros Contributor address; City; State; Zip Code Chicago, IL, 60608	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) KIPP
Date 06/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Benjamin Chou Contributor address; City; State; Zip Code Houston, TX, 77007	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Program Officer		Employer (See Instructions) Houston Endowment
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/26/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Emilio Gomez 6 Contributor address; City; State; Zip Code Phoenix, AZ, 85012	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Carnegie Learning
Date 06/26/2023	Full name of contributor out-of-state PAC (ID#: _____) Sabeen Arianpour Contributor address; City; State; Zip Code Richmond, TX, 77406	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Safal Partners
Date 06/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Samantha Chapa Contributor address; City; State; Zip Code Richmond, TX, 77406	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/27/2023	Full name of contributor out-of-state PAC (ID#: _____) Emily Gomez Contributor address; City; State; Zip Code Washington, DC, 20008	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) DCPS
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/27/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Norma Torres Mendoza 6 Contributor address; City; State; Zip Code Houston, TX, 77007	7 Amount of contribution (\$) 2,000.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Ernst & Young
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Arnold Salazar Contributor address; City; State; Zip Code Alamosa, CO, 81101	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Annie Kuhl Contributor address; City; State; Zip Code Austin, TX, 78752	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Research Associate		Employer (See Instructions) SRC
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Ademali Sengal Contributor address; City; State; Zip Code Brooklyn, NY, 11238	Amount of contribution (\$) 75.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/28/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Paloma Moreno 6 Contributor address; City; State; Zip Code Houston, TX, 77064	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) Education		9 Employer (See Instructions) TISD
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Katharine White Contributor address; City; State; Zip Code New York, NY, 11201	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) FIG
Date 06/28/2023	Full name of contributor out-of-state PAC (ID#: _____) Katherine Pineda Contributor address; City; State; Zip Code Bellaire, TX, 77401	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Program Manager		Employer (See Instructions) Education Superhighway
Date 06/29/2023	Full name of contributor out-of-state PAC (ID#: _____) Allison Raven Contributor address; City; State; Zip Code Marble Falls, TX, 78654	Amount of contribution (\$) 5.00
Principal occupation / Job title (See Instructions) Graduate Student		Employer (See Instructions) Duke University
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/29/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Marcela Andrés 6 Contributor address; City; State; Zip Code Houston, TX, 78860	7 Amount of contribution (\$) 25.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) designEDengagement
Date 06/29/2023	Full name of contributor out-of-state PAC (ID#: _____) Jonathan Gonzalez Contributor address; City; State; Zip Code McAllen, TX, 78504	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) JJ Gonzalez Attorney at Law
Date 06/29/2023	Full name of contributor out-of-state PAC (ID#: _____) Jack Golub Contributor address; City; State; Zip Code New York, NY, 10166	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: _____) Maxine Gomez Contributor address; City; State; Zip Code Alamosa, CO, 81101	Amount of contribution (\$) 1,000.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Jesus Davila 6 Contributor address; City; State; Zip Code Houston, TX, 77005	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Management Consultant		9 Employer (See Instructions) Landing Advisors LLC
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: _____) Preston Achilike Contributor address; City; State; Zip Code Austin, TX, 78745	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) School Administrator		Employer (See Instructions) St. Andrew's Episcopal School
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: _____) Paul J Gomez Contributor address; City; State; Zip Code Point Lookout, NY, 11569	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Real Estate Agent		Employer (See Instructions) Point Realty
Date 06/16/2023	Full name of contributor out-of-state PAC (ID#: _____) Plácido Andrés Gómez Contributor address; City; State; Zip Code Houston, TX, 77007	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Not Employed		Employer (See Instructions) Not Employed
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2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)
4 Date 06/20/2023	5 Full name of contributor out-of-state PAC (ID#: _____) Plácido Andrés Gómez 6 Contributor address; City; State; Zip Code TX, 77007	7 Amount of contribution (\$) 900.00
8 Principal occupation / Job title (See Instructions) Not Employed		9 Employer (See Instructions) Not Employed
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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.

1 Total pages Schedule F1: 1		2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)	
4 Date 06/23/2023		5 Payee name Leadership for Educational Equity			
6 Amount (\$) 250.00		7 Payee address; City; State; Zip Code 1805 7th Street NW, Washington, DC, 20001			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign Services		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name			
Date		Office sought			
Payee name		Office held			
Amount (\$)		Payee address;			
City; State; Zip Code		Category (See Categories listed at the top of this schedule)			
PURPOSE OF EXPENDITURE	Description		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name			
Date		Office sought			
Payee name		Office held			
Amount (\$)		Payee address;			
City; State; Zip Code		Category (See Categories listed at the top of this schedule)			
PURPOSE OF EXPENDITURE	Description		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date		Candidate / Officeholder name			
Payee name		Office sought			
Amount (\$)		Office held			
Payee address;		City; State; Zip Code			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name			
Date		Office sought			
Payee name		Office held			
Amount (\$)		Payee address;			
City; State; Zip Code		Category (See Categories listed at the top of this schedule)			
PURPOSE OF EXPENDITURE	Description		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH				

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 2		2 FILER NAME Plácido Andrés Gómez		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$ 0.00	
5 Date 06/26/2023		6 Payee name Squarespace Inc.			
7 Amount (\$) 20.00		8 Payee address; City; State; Zip Code 8 Clarkson St, New York, NY, 10014			
9 TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Other		(b) Description Website Domain Purchase	
		(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH					
Date 06/26/2023		Payee name Squarespace Inc.			
Amount (\$) 32.15		Payee address; City; State; Zip Code 8 Clarkson St, New York, NY, 10014			
TYPE OF EXPENDITURE		<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Other		Description Website Maintenance	
		Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held					
Complete ONLY if direct expenditure to benefit C/OH					
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 2	2 FILER NAME Plácido Andrés Gómez	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$ 0.00
5 Date 06/28/2023	6 Payee name Squarespace Inc.	
7 Amount (\$) 20.00	8 Payee address; City; State; Zip Code 8 Clarkson St, New York, NY, 10014	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Other	(b) Description Website Domain Purchase
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 06/28/2023	Payee name Squarespace Inc.	
Amount (\$) 20.00	Payee address; City; State; Zip Code 8 Clarkson St, New York, NY, 10014	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Other	Description Website Domain Purchase
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		