

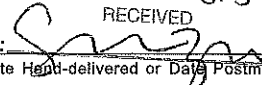
**PERLA C.**

**DIAZ**

**SEMI-ANNUAL  
REPORT  
JANUARY 18, 2022**

# 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: <b>17</b>	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Perla	MI C	<b>OFFICE USE ONLY</b>  Cameron County DEPARTMENT OF ELECTIONS & VOTER REGISTRATION  <b>JAN 18 2022</b>  RECEIVED 3:37 pm By:  Date Hand-delivered or Date Postmarked
	NICKNAME	LAST Diaz	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS				
Change of Address ADDRESS				
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE				
34 East Dr. Brownsville TX 78520				
5 CANDIDATE / OFFICEHOLDER PHONE				
AREA CODE PHONE NUMBER EXTENSION				
( 956 ) 442-0032				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Juan	MI M	Receipt #   Amount \$
	NICKNAME	LAST Barbosa	SUFFIX	Date Processed
7 CAMPAIGN TREASURER ADDRESS				
(Residence or Business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE				
2100 W. San Marcelo Blvd Apt #167 Brownsville TX 78520				
8 CAMPAIGN TREASURER PHONE				
AREA CODE PHONE NUMBER EXTENSION				
( 956 ) 266-3229				
9 REPORT TYPE				
<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)				
10 PERIOD COVERED				
Month Day Year      Month Day Year				
7 / 1 / 21      THROUGH      12 / 31 / 21				
11 ELECTION				
ELECTION DATE			ELECTION TYPE	
Month	Day	Year	<input checked="" type="checkbox"/> Primary    Runoff    Other Description General    Special	
3 / 1 / 21				
12 OFFICE		13 OFFICE SOUGHT (if known)		
OFFICE HELD (if any)		Cameron County Clerk		
14 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.				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		

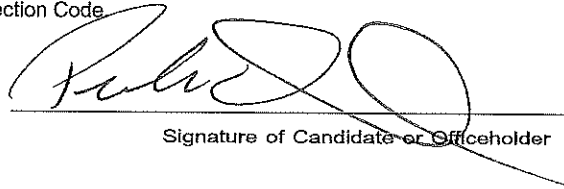
**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

<b>15 C/OH NAME</b> Perla Diaz		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 6,215.14
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 13,918.20
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 914.50
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,735.27
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 2,079.87
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,090.00

**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.



Signature of Candidate or Officeholder

Please complete either option below:

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, 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

OR

**(2) Unsworn Declaration**

My name is Perla Diaz, and my date of birth is 04/20/1983

My address is 34 East Dr., Brownsville, TX, 78520, Cameron

(street) (city) (state) (zip code) (country)

Executed in Cameron County, State of Texas, on the 17th day of January, 2022

(month) (year)

Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> DIAZ, PERLA	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 13,415.14
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 503.06
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,230.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 10,735.27
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/4 Rpt: 4/17
<b>2</b> FILER NAME DIAZ, PERLA		<b>3</b> Filer ID
<b>4</b> Date 11/07/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Agado Bail Bonds	<b>7</b> Amount of Contribution (\$)  \$250.00
	<b>6</b> Contributor address; City; State; Zip Code 311 S C St.  Harlingen , TX 78550	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 11/09/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Alaniz, Noe (Mr.)	<b>Amount of Contribution (\$)</b>  \$200.00
	<b>Contributor address; City; State; Zip Code</b> 201 S Sam Houston Blvd  San Benito , TX 78586	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/05/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Anytime Fitness	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b> 2451 Pablo Kisel Blvd  Brownsville , TX 78526	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/02/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbosa, Adelina (Mrs.)	<b>Amount of Contribution (\$)</b>  \$1,000.00
	<b>Contributor address; City; State; Zip Code</b> 10 Casa De Palmas  Brownsville, TX 78520	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 08/02/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Barbosa, Juan (Mr.)	<b>Amount of Contribution (\$)</b>  \$1,000.00
	<b>Contributor address; City; State; Zip Code</b> 2100 San Marcelo #167  Brownsville, TX 78520	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/4 Rpt: 5/17
<b>2</b> FILER NAME DIAZ, PERLA		<b>3</b> Filer ID
<b>4</b> Date 11/10/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cisneros, Reynaldo (Mr.)	<b>7</b> Amount of Contribution (\$)  \$300.00
	<b>6</b> Contributor address; City; State; Zip Code 950 E. Van Buren  Brownsville, TX 78520	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 11/10/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Cornejo, Anthony (Mr.)	<b>Amount of Contribution (\$)</b>  \$300.00
	<b>Contributor address; City; State; Zip Code</b> 905 E. Jackson St  Brownsville, TX 78520	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 09/10/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis , Robert (Mr.)	<b>Amount of Contribution (\$)</b>  \$250.00
	<b>Contributor address; City; State; Zip Code</b> 2901 Haine Dr. Apt 1707  Harlingen , TX 78550	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 11/01/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Dinsdale, Edna (Mrs.)	<b>Amount of Contribution (\$)</b>  \$300.00
	<b>Contributor address; City; State; Zip Code</b> 847 E. Harrison St.  Brownsville , TX 78520	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 10/29/2021	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, Noe (Mr.)	<b>Amount of Contribution (\$)</b>  \$300.00
	<b>Contributor address; City; State; Zip Code</b> 946 E. Van Buren St  Brownsville , TX 78520	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/4 Rpt: 6/17
<b>2</b> FILER NAME DIAZ, PERLA		<b>3</b> Filer ID
<b>4</b> Date 11/08/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Luis	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>6</b> Contributor address; City; State; Zip Code 950 E. Van Buren  Brownsville, TX 78520		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) La Placita Tacos	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 943 I-69 E Frontage RD  Brownsville , TX 78521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawler, Marion (Mr.)	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 805 Media Luna 620  Brownsville, TX 78520		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/02/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munoz, Mary	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 154 Avenida De La Plata  Brownsville , TX 78521		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olivares, Noe	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 25224 N Kansas City Rd  La Feria , TX 78559		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/4 Rpt: 7/17
<b>2</b> FILER NAME DIAZ, PERLA		<b>3</b> Filer ID
<b>4</b> Date 11/02/2021	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Wendi (Mrs.)	<b>7</b> Amount of Contribution (\$)  \$300.00
<b>6</b> Contributor address; City; State; Zip Code 9747 US Highway 277 S  Hawley, TX 79525		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 11/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Maria	Amount of Contribution (\$)  \$300.00
Contributor address; City; State; Zip Code 16331 S. US HWY 281  San Benito , TX 78586		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyna, Derek (Mr.)	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 1201 E Van Buren  Brownsville , TX 78520		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Courtyard Patio Bar	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 1805 E. Ruben Torres Blvd B2  Brownsville, TX 78520		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Kraken Lounge	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 1123 E. Adams St Ste C  Brownsville, TX 78520		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/2 Rpt: 8/17	
2 FILER NAME DIAZ, PERLA		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 08/06/2021	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarrete, Rubi	8 Amount of contribution (\$) \$134.22	9 In-kind contribution description Purchased beans and coolers for fundraiser
	7 Contributor address; City; State; Zip Code 4679 Palacio Real Dr  Brownsville, TX 78521	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Cashier		11 Employer (FOR NON-JUDICIAL) (See instructions) Home Depot	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 12/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarrete, Rubi	Amount of contribution (\$) \$134.22	In-kind contribution description Bought beans and supplies for fundraiser
	Contributor address; City; State; Zip Code 4679 Palacio Real Dr  Brownsville, TX 78521	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Cashier		Employer (FOR NON-JUDICIAL) (See instructions) Home Depot	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 08/06/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarrete, Savanna	Amount of contribution (\$) \$117.31	In-kind contribution description bought rice and jalapenos for fundraiser
	Contributor address; City; State; Zip Code 9702 San Carlos  Houston , TX 77013	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Dental Assistant		Employer (FOR NON-JUDICIAL) (See instructions) West U Pediatric Dentistry	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 2/2 Rpt: 9/17	
<b>2</b> FILER NAME DIAZ, PERLA		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 12/09/2021	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Navarrete , Savanna	<b>8</b> Amount of contribution (\$) \$117.31	<b>9</b> In-kind contribution description Bought rice and jalapeno for fundraiser
	<b>7</b> Contributor address; City; State; Zip Code 9702 San Carlos  Houston , TX 77013		
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Dental Assistant		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions) West U Pediatric Dentistry	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Check if travel outside of Texas. Complete Schedule T.

**LOANS****SCHEDULE E**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 10/17
<b>2</b> FILER NAME DIAZ, PERLA		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 11/10/2021	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) DIAZ, PERLA	<b>9</b> Loan Amount (\$) \$1,230.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 34 East Dr  Brownsville, TX 78520	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) Court Administrator		<b>13</b> Employer (See Instructions) Cameron County Court at Law #2
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1: Sch: 1/7 Rpt: 11/17	<b>2</b> FILER NAME DIAZ, PERLA	<b>3</b> Filer ID
<b>4</b> Date 12/21/2021	<b>5</b> Payee name Berrones, Francisco	
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code 1730 E. Taft St.  Brownsville, TX 78521	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Blockwalker
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2021	Payee name Berrones, Francisco	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 1730 E. Taft St.  Brownsville, TX 78521	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Blockwalking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/09/2021	Payee name Arre Vivo Bar	
Amount (\$) \$780.92	Payee address; City; State; Zip Code 2223 Central Blvd  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Kick-off Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1: Sch: 2/7 Rpt: 12/17	<b>2</b> FILER NAME DIAZ, PERLA	<b>3</b> Filer ID
<b>4</b> Date 12/21/2021	<b>5</b> Payee name Balderas, Yustin	
<b>6</b> Amount (\$) \$300.00	<b>7</b> Payee address; City; State; Zip Code 6921 Vivero Dr.  Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Blockwalker
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 12/30/2021	Payee name Balderas, Yustin	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 6921 Vivero Dr.  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Blockwalking
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 11/18/2021	Payee name Cameron County Democratic Party	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code P.O. Box 533909  Harlingen , TX 78553	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee to be placed on Ballot
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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 F1: Sch: 3/7 Rpt: 13/17		2 FILER NAME DIAZ, PERLA		3 Filer ID	
4 Date 11/05/2021		5 Payee name Charro Days			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code 455 E Elizabeth St.  Brownsville, TX 78520			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parade Entry for Christmas Parade	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/17/2021		Payee name Chavez, Oziel			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 7248 Mulberry St  Brownsville, TX 78520			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Assistant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/13/2021		Payee name Galaxy Bowling Center			
Amount (\$) \$860.85		Payee address; City; State; Zip Code 3451 Pablo Kisel Blvd  Brownsville, TX 78520			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and lane payment for bowling tournament	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1: Sch: 4/7 Rpt: 14/17	<b>2</b> FILER NAME DIAZ, PERLA	<b>3</b> Filer ID
<b>4</b> Date 11/03/2021	<b>5</b> Payee name Gonzalez, Armando	
<b>6</b> Amount (\$) \$400.00	<b>7</b> Payee address; City; State; Zip Code 1045 Beaver Lake Brownsville, TX 78520	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Putting up Campaign Signs
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 09/06/2021	Payee name Hi Tech Digital Print	
Amount (\$) \$1,214.00	Payee address; City; State; Zip Code 1225 N. Expressway Suite C #15-78  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 09/27/2021	Payee name Hi Tech Digital Print	
Amount (\$) \$480.00	Payee address; City; State; Zip Code 1225 N. Expressway Suite C #15-78  Brownsville, TX 78520	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Signs
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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 F1: Sch: 5/7 Rpt: 15/17	2 FILER NAME DIAZ, PERLA		3 Filer ID
4 Date 10/13/2021	5 Payee name Hi Tech Digital Print		
6 Amount (\$) \$1,140.00	7 Payee address; City; State; Zip Code 1225 N. Expressway Suite C #15-78  Brownsville, TX 78520		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political Signs	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/07/2021	Payee name Kikis Restaurant		
Amount (\$) \$81.12	Payee address; City; State; Zip Code 965 W. Ruben Torres Blvd  Brownsville, TX 78520		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 08/06/2021	Payee name Lopez Supermarket		
Amount (\$) \$568.80	Payee address; City; State; Zip Code 2814 International Blvd.  Brownsville, TX 78521		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Chicken for Chicken plate fundraiser	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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.

<b>1</b> Total pages Schedule F1: Sch: 6/7 Rpt: 16/17	<b>2</b> FILER NAME DIAZ, PERLA	<b>3</b> Filer ID
<b>4</b> Date 11/21/2021	<b>5</b> Payee name SRS Advertising	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 1124 Morningside Rd  Brownsville, TX 78521	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pushcards
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/01/2021	Payee name Texas Democratic Party	
Amount (\$) \$193.75	Payee address; City; State; Zip Code P.O. Box 15707  Austin , TX 78761	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN List
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/23/2021	Payee name Texas Democratic Party	
Amount (\$) \$193.75	Payee address; City; State; Zip Code P.O. Box 15707  Austin , TX 78761	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN List
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

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 F1: Sch: 7/7 Rpt: 17/17		2 FILER NAME DIAZ, PERLA		3 Filer ID	
4 Date 09/23/2021		5 Payee name Texas Democratic Party			
6 Amount (\$) \$193.75		7 Payee address; City; State; Zip Code P.O. Box 15707  Austin , TX 78761			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense VAN List	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/06/2021		Payee name Valley Grocers LLC			
Amount (\$) \$170.83		Payee address; City; State; Zip Code 634 E. Fronton St.  Brownsville, TX 78520			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Plates and utensils for chicken plate fundraiser	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/08/2021		Payee name Walmart			
Amount (\$) \$43.00		Payee address; City; State; Zip Code 3500 W. Alston Gloor Blvd  Brownsville, TX 78520			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense School Supply Drive	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	