

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME
ALONZO R. PEREZ

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)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 15,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,304.23
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 12,196
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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

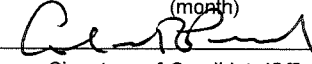
OR

(2) Unsworn Declaration

My name is ALONZO R. PEREZ, and my date of birth is 9/2/1964

My address is 532 W. RICKY CROSSLAND, ELSA, TX, 78543, USA
(street) (city) (state) (zip code) (country)

Executed in Hidalgo County, State of TEXAS, on the 2 day of APRIL, 2026
(month) (year)


Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

**FORM C/OH
COVER SHEET PG 3**

19 FILER NAME ALONZO R. PEREZ		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 15,500
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 12,196
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. <input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$
10. <input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$

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: 3
2 FILER NAME ALONZO R. PEREZ		3 Filer ID (Ethics Commission Filers)
4 Date 3/6/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BERMUDEZ AFFORDABLE HOMES LLC 6 Contributor address; City; State; Zip Code 320 W. VFW ELSA, TX 78543	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) CONSTRUCTION		9 Employer (See Instructions)
Date 3/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FIVE STAR ELECTRICAL & KIGHTING LLC Contributor address; City; State; Zip Code 202 W. EDINBURG AVE ELSA, TX 78543	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) ELECTRICAL		Employer (See Instructions)
Date 3/9/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) G & S GLASS, LLC Contributor address; City; State; Zip Code 616 N. CLOSNER BLVD EDINBURG, TX 78541	Amount of contribution (\$) 2,500
Principal occupation / Job title (See Instructions) GLASS		Employer (See Instructions)
Date 3/10/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GUSTAVO L. ACEVEDO JR P.C Contributor address; City; State; Zip Code 814 DEL ORO LANE PHARR, TX 78577	Amount of contribution (\$) 5,000
Principal occupation / Job title (See Instructions) ATTORNEY		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.		

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: 3
2 FILER NAME ALONZO R. PEREZ		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LINEGARGER GOGGAN BLAIR & SAMPSON, LLP	7 Amount of contribution (\$) 1,000.00
6 Contributor address; City; State; Zip Code P.O. BOX 17428 AUSTIN, TX 78760		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions)
Date 3/17/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BILLY'S AUTOMOTIVE	Amount of contribution (\$) 500.00
Contributor address; City; State; Zip Code 122 S. 85TH ST. EDINBURG, TX 78542		
Principal occupation / Job title (See Instructions) MECHANIC		Employer (See Instructions)
Date 3/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) JOSE T. GARCIA LETICIA R. GARCIA	Amount of contribution (\$) 2,000
Contributor address; City; State; Zip Code 1717 PEBBLE DR. MISSION, TX 78574		
Principal occupation / Job title (See Instructions) INSURANCE BROKERS		Employer (See Instructions)
Date 3/9/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DG & GG INVESTMENTS, LLC	Amount of contribution (\$) 500
Contributor address; City; State; Zip Code P.O.BOX 1928 MISSION, TX 78573		
Principal occupation / Job title (See Instructions) UTILITIES		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 3
2 FILER NAME ALONZO R. PEREZ		3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2026	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GGG CONSTRUCTION SERVICES LLC	7 Amount of contribution (\$) 500
6 Contributor address; City; State; Zip Code 1010 W. MILE 10 N. WESLACO, TX 78599		
8 Principal occupation / Job title (See Instructions) ATTORNEY		9 Employer (See Instructions)
Date 3/24/2026	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CSJ GROUP	Amount of contribution (\$) 2,500.00
Contributor address; City; State; Zip Code P.O.BOX 3665 EDINBURG ,TX 78540		
Principal occupation / Job title (See Instructions) ENGINEER		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.</p>		

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: 6	2 FILER NAME ALONZO R. PEREZ	3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2026	5 Payee name ROBOCENT	
6 Amount (\$) 166.67	7 Payee address; City; State; Zip Code 2129 GENERAL BOOTH BLVD STE 103 VIRGINA BEACH, VA 23454	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) ADVERTISING	(b) Description TEXTING SYSTEM
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR
Date 3/13/2026	Payee name POLI- SIGNS RGV	
Amount (\$) 810.14	Payee address; City; State; Zip Code 305 S. ILLINOIS AVE WESLACO, TX 78599	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING	Description SIGNS
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR
Date 3/13/2026	Payee name GIOVANA ZAMAORANO	
Amount (\$) 75.00	Payee address; City; State; Zip Code 413 N. IOWA AVE WESLACO TX 78596	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING	Description GRAPHIC DESIGN
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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			

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1 Total pages Schedule F1: 6	2 FILER NAME ALONZO R. PEREZ	3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2026	5 Payee name MELISSA BAZAN	
6 Amount (\$) 166.67	7 Payee address; City; State; Zip Code P.O. BOX 268 ELSA, TX 78543	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONTRACT LABOR	(b) Description GOTV
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR
Date 3/24/2026	Payee name AMANELA ANZALDUA	
Amount (\$) 166.67	Payee address; City; State; Zip Code 25006 LA NUBES DR. MONTE ALTO, TX 78538	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description GOTV
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR
Date 3/24/2026	Payee name RUBEN GONZALEZ	
Amount (\$) 166.67	Payee address; City; State; Zip Code 508 ADKINS ST. EDCOUCH TX 78538	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description GOTV
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 | | | |

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1 Total pages Schedule F1: 6	2 FILER NAME ALONZO R. PEREZ	3 Filer ID (Ethics Commission Filers)
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4 Date 3/24/2026	5 Payee name JESUS MORAN
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6 Amount (\$) 166.67	7 Payee address; P.O. BOX 1217	City; ELSA, TX	State;	Zip Code 78543
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONTRACT LABOR	(b) Description GOTV
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR	Office held
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Date 3/24/2026	Payee name GLORIA GARCIA
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Amount (\$) 166.67	Payee address; 18208 NITSCHER DR	City; EDINBURG , TX	State;	Zip Code 78542
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description GOTV
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR	Office held
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Date 3/24/2026	Payee name OMAR GARCIA
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Amount (\$) 166.67	Payee address; 7915 TEXAS ST.	City; EDCOUCH	State;	Zip Code TX 78538
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description GOTV
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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: 6	2 FILER NAME ALONZO R. PEREZ	3 Filer ID (Ethics Commission Filers)
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4 Date 3/24/2026	5 Payee name PEARL ARISPE
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6 Amount (\$) 166.67	7 Payee address; 501 N. CARLOS ARISPE ST.	City; ELSA	State; TX	Zip Code 78543
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONTRACT LABOR	(b) Description GOTV
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR	Office held
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Date 3/24/2026	Payee name FUTURE STRIKLERS OTA- LISA ALVARADO
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Amount (\$) 66.67	Payee address; 16002 N FM 88	City; WESLACO , TX	State; TX	Zip Code 78599
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FUNDRAISING EXPENSE	Description TOURNAMENT
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR	Office held
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Date 3/24/2026	Payee name ISABEL MARTINEZ
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Amount (\$) 166.67	Payee address; P.O.BOX 3971	City; EDCOUCH , TX	State; TX	Zip Code 78538
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) CONTRACT LABOR	Description GOTV
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR	Office held
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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: 6	2 FILER NAME ALONZO R. PEREZ	3 Filer ID (Ethics Commission Filers)
4 Date 3/24/2026	5 Payee name JENNIFER VIERA	
6 Amount (\$) 166.67	7 Payee address; P.O.BOX 2582	City; State; Zip Code ELSA, TX 78543
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONTRACT LABOR	(b) Description GOTV
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought / Office held MAYOR
Date 3/22/2026	Payee name PINS & CUES	
Amount (\$) 235.76	Payee address; 514 PLAZA LOS ENCINOS	City; State; Zip Code WESLACO , TX 78596
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FUNDRAISING EXPENSE	Description BOWLING RENTAL
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought / Office held MAYOR
Date 3/22/2026	Payee name BETT'S 1. STOP RUBEN BARRERA	
Amount (\$) 33.33	Payee address; 805 S. INTERNATIONAL BLVD	City; State; Zip Code WESLACO, TX 78596
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FUNDRAISING EXPENSE	Description TOURNAMENT
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought / Office held MAYOR

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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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 Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out Of District |
| Credit Card Payment | Legal Services | Salaries/Wages/Contract Labor | Other (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6	2 FILER NAME ALONZO R. PEREZ	3 Filer ID (Ethics Commission Filers)
4 Date 3/23/2026	5 Payee name OSCAR GARCIA	
6 Amount (\$) 166.67	7 Payee address; City; State; Zip Code 21223 MAIN ST. EDCOUCH, TX 78538	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) CONTRACT LABOR	(b) Description GOTV
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office held MAYOR
Date 3/22/2026	Payee name ANGEL TREJO	
Amount (\$) 150.00	Payee address; City; State; Zip Code 2512 S C ST MCALLEN TX 78503	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) ADVERTISING	Description VIDEO
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office held MAYOR
Date 3/22/2026	Payee name LEROY RODRIGUEZ	
Amount (\$) 100.00	Payee address; City; State; Zip Code 5409 BRICK LANE DR WESLACO TX 78596	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) FUNDRAISING EXPENSE	Description TOURNAMENT
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office sought MAYOR
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name ALONZO R. PEREZ	Office held MAYOR

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED