

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

<b>The C/OH Instruction Guide explains how to complete this form.</b>		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: <b>9</b>
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS (MR) <b>(MR)</b>	FIRST <b>Edward</b>	MI <b>B</b>
	NICKNAME <b>Ed</b>	LAST <b>Perry</b>	SUFFIX
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE		
	<b>5122 Blue Canoe Rd Manvel TX 77578</b>		
<input type="checkbox"/> Change of Address			
<b>5 CANDIDATE / OFFICEHOLDER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION
	<b>(718)</b>	<b>607-4104</b>	
<b>6 CAMPAIGN TREASURER NAME</b>	MS / MRS (MR) <b>(MR)</b>	FIRST <b>Edward</b>	MI <b>B</b>
	NICKNAME <b>Ed</b>	LAST <b>Perry</b>	SUFFIX
<b>7 CAMPAIGN TREASURER ADDRESS</b>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	<b>5122 Blue Canoe Rd Manvel TX 77578</b>		
<b>8 CAMPAIGN TREASURER PHONE</b>	AREA CODE	PHONE NUMBER	EXTENSION
	<b>(718)</b>	<b>607-4104</b>	
<b>9 REPORT TYPE</b>	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded Modified Reporting Limit <input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10 PERIOD COVERED</b>	Month	Day	Year
	<b>3</b>	<b>25</b>	<b>2025</b>
THROUGH		Month	Day
THROUGH		<b>4</b>	<b>24</b>
<b>11 ELECTION</b>	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
	<b>5</b>	<b>03</b>	<b>2025</b>
<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description		<input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
<b>12 OFFICE</b>	OFFICE HELD (if any)		OFFICE SOUGHT (if known)
	<b>Manvel City Council Place 4</b>		<b>Manvel City Council Place 4</b>
<b>14 NOTICE FROM POLITICAL COMMITTEE(S)</b>	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.		
	COMMITTEE TYPE	COMMITTEE NAME	
	<input type="checkbox"/> GENERAL		
	<input type="checkbox"/> SPECIFIC		
	<input type="checkbox"/> Additional Pages	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**FORM C/OH  
COVER SHEET PG 2**

16 C/OH NAME

*Edward B. Perry*

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)	\$ 5.16
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 205 <sup>16</sup>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 5.16
	4. TOTAL POLITICAL EXPENDITURES	\$ 1090 <sup>23</sup>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1288 <sup>02</sup>

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 Edward B Perry and my date of birth is August 4, 1968  
 My address is 5122 Blue Canoe Rd, Manvel, TX, 77578 Brazoria TX  
(street) (city) (state) (zip code) (country)  
 Executed in Brazoria County, State of TX, on the 24<sup>th</sup> day of April, 2025  
(month) (year)  
 \_\_\_\_\_  
 Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH**

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

<b>19 FILER NAME</b> <i>Edward B Perry</i>		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b>	<b>NAME OF SCHEDULE</b>	<b>SUBTOTAL AMOUNT</b>
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 200 <sup>00</sup>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 790 <sup>88</sup>
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 1085 <sup>07</sup>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 0
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

# 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: <u>1</u>
2 FILER NAME <u>Edward B Perry</u>		3 Filer ID (Ethics Commission Filers)
4 Date <u>3/27/2025</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Renita Jones</u>	7 Amount of contribution (\$) <u>\$100.00</u>
6 Contributor address; City; State; Zip Code [REDACTED]		
8 Principal occupation / Job title (See Instructions) <u>Retail Asst. Manager</u>		9 Employer (See Instructions) <u>Pennywise Thrift Store</u>
Date <u>4/06/2025</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Roosevelt Weeks</u>	Amount of contribution (\$) <u>\$100.00</u>
Contributor address; City; State; Zip Code [REDACTED]		
Principal occupation / Job title (See Instructions) <u>Director of Libraries</u>		Employer (See Instructions) <u>Fort Bend County Library</u>
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)

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

**LOANS**

**SCHEDULE E**

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: <span style="font-size: 2em; font-family: cursive;">3</span>
<b>2</b> FILER NAME <span style="font-size: 1.5em; font-family: cursive;">Edward B. Perry</span>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan <span style="font-size: 1.2em; font-family: cursive;">4/23/2025</span>	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <span style="font-size: 1.2em; font-family: cursive;">Edward B. Perry</span>	<b>9</b> Loan Amount (\$) <span style="font-size: 1.2em; font-family: cursive;">\$ 215<sup>00</sup></span>
<b>6</b> Is lender a financial institution? Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	<b>8</b> Lender address; City; State; Zip Code <span style="font-size: 1.2em; font-family: cursive;">5122 Blue Canoe Rd Manvel TX 77578</span>	<b>10</b> Interest rate <span style="font-size: 1.2em; font-family: cursive;">0</span>
		<b>11</b> Maturity date <span style="font-size: 1.2em; font-family: cursive;">none</span>
<b>12</b> Principal occupation / Job title (See Instructions) <span style="font-size: 1.2em; font-family: cursive;">Outreach Coordinator</span>		<b>13</b> Employer (See Instructions) <span style="font-size: 1.2em; font-family: cursive;">Dept of VA</span>
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<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 (See Instructions)		<b>21</b> Employer (See Instructions)

  

Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ )	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

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**LOANS**

**SCHEDULE E**

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1 Total pages Schedule E:</b>
<b>2 FILER NAME</b> <i>Edward B Perry</i>		<b>3 Filer ID (Ethics Commission Filers)</b>
<b>4 TOTAL OF UNITEMIZED LOANS</b>		\$
<b>5 Date of loan</b> <i>3/27/2025</i>	<b>7 Name of lender</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <i>Edward B. Perry</i>	<b>9 Loan Amount (\$)</b> <i>\$435<sup>00</sup></i>
<b>6 Is lender a financial institution?</b> Y <input type="radio"/> N <input checked="" type="radio"/>	<b>8 Lender address; City; State; Zip Code</b> <i>5122 Blue Canoe Rd Manvel TX 77578</i>	<b>10 Interest rate</b> <i>0</i>
		<b>11 Maturity date</b> <i>none</i>
<b>12 Principal occupation / Job title (See Instructions)</b> <i>Outreach Coordinator</i>		<b>13 Employer (See Instructions)</b> <i>Dept of VA</i>
<b>14 Description of Collateral</b> <input checked="" type="checkbox"/> none		<b>15</b> <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<b>16 GUARANTOR INFORMATION</b> <input checked="" type="checkbox"/> not applicable	<b>17 Name of guarantor</b>	<b>19 Amount Guaranteed (\$)</b>
	<b>18 Guarantor address; City; State; Zip Code</b>	
<b>20 Principal Occupation (See Instructions)</b>		<b>21 Employer (See Instructions)</b>
<b>Date of loan</b> <i>4/05/2025</i>	<b>Name of lender</b> <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <i>Edward B. Perry</i>	<b>Loan Amount (\$)</b> <i>\$ 37<sup>89</sup></i>
<b>Is lender a financial institution?</b> Y <input type="radio"/> N <input checked="" type="radio"/>	<b>Lender address; City; State; Zip Code</b> <i>5122 Blue Canoe Rd Manvel TX 77578</i>	<b>Interest rate</b> <i>0</i>
		<b>Maturity date</b> <i>none</i>
<b>Principal occupation / Job title (See Instructions)</b> <i>Outreach Coordinator</i>		<b>Employer (See Instructions)</b> <i>Dept of VA</i>
<b>Description of Collateral</b> <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<b>GUARANTOR INFORMATION</b> <input checked="" type="checkbox"/> not applicable	<b>Name of guarantor</b>	<b>Amount Guaranteed (\$)</b>
	<b>Guarantor address; City; State; Zip Code</b>	
<b>Principal Occupation (See Instructions)</b>		<b>Employer (See Instructions)</b>

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**LOANS**

**SCHEDULE E**

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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E:
<b>2</b> FILER NAME <i>Edward B Perry</i>		<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan <i>4/07/2025</i>	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <i>Edward B Perry</i>	<b>9</b> Loan Amount (\$) <i>\$5299</i>
<b>6</b> Is lender a financial institution? <input checked="" type="radio"/> Y <input checked="" type="radio"/> N	<b>8</b> Lender address; City; State; Zip Code <i>5122 Blue Cane Rd Manvel TX 77578</i>	<b>10</b> Interest rate <i>0</i>
		<b>11</b> Maturity date <i>none</i>
<b>12</b> Principal occupation / Job title (See Instructions) <i>Outreach Coordinator</i>		<b>13</b> Employer (See Instructions) <i>Dept of VA</i>
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> <input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<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 (See Instructions)		<b>21</b> Employer (See Instructions)
Date of loan <i>4/11/2025</i>	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____ ) <i>Edward B Perry</i>	Loan Amount (\$) <i>\$50<sup>00</sup></i>
Is lender a financial institution? <input checked="" type="radio"/> Y <input checked="" type="radio"/> N	Lender address; City; State; Zip Code <i>5122 Blue Cane Rd Manvel TX 77578</i>	Interest rate <i>0</i>
		Maturity date <i>none</i>
Principal occupation / Job title (See Instructions) <i>Outreach Coordinator</i>		Employer (See Instructions) <i>Dept of VA</i>
Description of Collateral <input checked="" type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
<b>GUARANTOR INFORMATION</b> <input checked="" type="checkbox"/> not applicable	<b>Name of guarantor</b>	<b>Amount Guaranteed (\$)</b>
<b>Guarantor address; City; State; Zip Code</b>		
<b>Principal Occupation (See Instructions)</b>		<b>Employer (See Instructions)</b>

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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.

<b>1</b> Total pages Schedule F1: 3	<b>2</b> FILER NAME Edward B. Perry	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3/27/2025	<b>5</b> Payee name Precision Graphics Group	
<b>6</b> Amount (\$) \$435 <sup>00</sup>	<b>7</b> Payee address: 8325 Broadway Ste 202 #41 Pearland TX 77581 <small>City: State: Zip Code</small>	
<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 Campaign Road Signage
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held
Date 4/05/2025	Payee name Office Depot Office Max	
Amount (\$) \$3799	Payee address: 3000 Silver Lake Villages D Pearland TX 77584 <small>City: State: Zip Code</small>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising	Description Campaign Post Cards
	<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	Office sought      Office held
Date 4/07/2025	Payee name The Home Depot	
Amount (\$) \$9710	Payee address: 10111 Broadway Silverlake Pearland TX 77584 <small>City: State: Zip Code</small>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Campaign Sign Stakes
	<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	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# 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.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME <i>Edward B Perry</i>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <i>4/07/2025</i>	<b>5</b> Payee name <i>The Home Depot</i>	
<b>6</b> Amount (\$) <i>\$ 5299</i>	<b>7</b> Payee address: City; State; Zip Code <i>10111 Broadway Silverlake Pearland TX 77584</i>	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising</i>	<b>(b)</b> Description <i>Campaign Sign Tools</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>4/11/2025</i>	Payee name <i>Harvest Design (We Design Thousand That) by Archbishop Iris Bey</i>		
Amount (\$) <i>\$ 5000</i>	Payee address: City; State; Zip Code <i>921 N Belle Ar Angleton TX 77515</i>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Post Card Design</i>	
	<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	Office sought	Office held
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Date <i>4/19/2025</i>	Payee name <i>The Home Depot</i>		
Amount (\$) <i>\$ 9709</i>	Payee address: City; State; Zip Code <i>10111 Broadway Silverlake Pearland TX 77584</i>		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Campaign Sign Stakes</i>	
	<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	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# 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  
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/Wage/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:	<b>2</b> FILER NAME <i>Edward B Perry</i>	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date <i>4/23/2025</i>	<b>5</b> Payee name <i>Precision Graphics Group</i>
-----------------------------------	--

<b>6</b> Amount (\$) <i>\$315<sup>00</sup></i>	<b>7</b> Payee address; <i>8325 Broadway Ste 202#41 Pearland TX 77581</i>
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) <i>Advertising</i>	<b>(b)</b> Description <i>Campaign Push Cards</i>
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
------	------------

Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<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	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<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	Office sought	Office held
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**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**