CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

	The C/OH Instruction G	uide explains how	to complete t	his form.	1 Filer ID (Ethics 0	Commission Filers)	2 Total pages	filed: 8
3	CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRS Placio			мı А	OFFIC	E USE ONLY
	NAME	NICKNAME	LAS Gom			SUFFIX	Date Received	
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; 4018 Gibson		SUITE $\#$; CITE ON, TX, 77		ZIP CODE	JAN	1 5 2025
	Change of Address							
5	CANDIDATE/ OFFICEHOLDER PHONE	(505)	PHONE NUM 426-77		EXTENS	ION	·····	ed or Date Postmarked
6	CAMPAIGN TREASURER	MS / MRS / MR	FIRS			МІ	Receipt #	Amount \$
	NAME		Rola				Date Processed	
		NICKNAME	LAS Hino			SUFFIX	Date Imaged	
7	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEA	ASE); APT / SUI	TE #; CITY	'. †	STATE;	ZIP CODE
	TREASURER ADDRESS	515 Memoria	I Heights	Dr, Houst	on, TX, 7700	7		
()	Residence or Business)							
8	CAMPAIGN TREASURER	AREA CODE	PHONE NUM	MBER	EXTENS	ION		
	PHONE	(713)	907-45	579				
9	REPORT TYPE	January 15	3	Oth day before ele	ction Ru	noff		after campaign appointment der Only)
		July 15	81	h day before elect	1011	ceeded Modified porting Limit		ort (Attach C/OH - FR)
10	PERIOD	Month	Day	Year		Month	Day Ye	ar
	COVERED	7 /	/ 01 /	24	THROUGH	12	/ 31 / 24	4
11	ELECTION	ELECTION DA	TE			ELECTION TYPE		
		Month Day	Year	Primary	Runoff	Other Description		
		/ /		General	Special			
12	OFFICE	OFFICE HELD (if any)	<u>, , , , , , , , , , , , , , , , , , , </u>		13 OFFICE	SOUGHT (if known)	
		HISD Board	of Trustee	es, District	VIII			
14	NOTICE FROM POLITICAL	THE CANDIDATE / OFFIC	EHOLDER. THES	E EXPENDITURES I	MAY HAVE BEEN MADE	WITHOUT THE CANE	DIDATE'S OR OFFICEH	OMMITTEES TO SUPPORT OLDER'S KNOWLEDGE OR OF SUCH EXPENDITURES.
	COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE	NAME				
		GENERAL	COMMITTEE A	ADDRESS				
	Additional Pages		COMMITTEE	CAMPAIGN TREA	SURER NAME			
		SPECIFIC	COMMITTEE	SAME AIGH TREA	OCINETY HANGE			
			COMMITTEE	CAMPAIGN TREA	ASURER ADDRESS			
				GO TO F	PAGE 2			

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

			1		
15 C/OH NAME Placido Gomez			16 File	r ID (Ethics (Commission Filers)
17 CONTRIBUTION TOTALS	TOTAL UNITEMIZED POLITIC PLEDGES, LOANS, OR GUAR CONTRIBUTIONS MADE ELECT		N	\$	0
	2. TOTAL POLITICAL CONTRI (OTHER THAN PLEDGES, LOA	BUTIONS NS, OR GUARANTEES OF LOANS	1	\$	0
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICA	AL EXPENDITURE.		\$	0
	4. TOTAL POLITICAL EXPEND	DITURES		\$	351.80
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBU OF REPORTING PERIOD	TIONS MAINTAINED AS OF THE LA	ST DAY	\$	15,497.68
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT O LAST DAY OF THE REPORTIN	F ALL OUTSTANDING LOANS AS O	FTHE	\$	0
	wear, or affirm, under penalty of perjury, quired to be reported by me under Title 15, f		e and co	orrect and in	cludes all information
		PlacedoStan			
		Signature of Ca	andidate	or Officehol	der
	Diago com	alata aithar antian halas			
	Flease Comp	olete either option belov	v.		
(1) Affidavit					
NOTABY OTAMB (OF A					
NOTARY STAMP/SEA	L				
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 administe	ering oath Printed name of of	ficer administering oath		Title of offic	er administering oath
	10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	OR			
(2) Unsworn Declarati	on			·	
My name is Placido G	Gomez	, and my date of birth is	, <u>Мау</u>	19, 1991	······
My address is 4018 Gi	bson St	Houston T	X, 7	77007	USA
	(street)	(city)	state)	(zip code)	(country)
Executed in Harris	County, State of Texas	, on the 15th day of Janu (mont			
	, · · · · · · · · · · · · · · · · · · ·	Placity Lervey	h)	(year)	
		Signature of Candi	date/Offi	ceholder (De	clarant)
		_		•	•

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

l	FILER NAME acido Gomez 20 Filer ID (Ethics Cor	nmiss	ion Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1,	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	0
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	0
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	0
4.	SCHEDULE E: LOANS	\$	0
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	127.92
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	0
7,	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$	0
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	223.88
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$	0
10,	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	0
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$	0
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	0

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/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 c	omplete this form.		
1 Total pages Schedule F1: 2	2 FILER NAME Placido Gomez		3 Filer ID (Ethic	s Commission Filers)
4 Date	5 Payee name			
7/20/2024	Mailchimp			
6 Amount (\$)	7 Payee address;	City;	State;	Zip Code
\$21.32	505 N Angier Ave, NE, Atlanta, GA, 3	0308		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
PURPOSE OF EXPENDITURE	Other: Communication	Informational e	emails	
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder livin	g expense
9 Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
8/20/2024	Mailchimp			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$21.32	505 N Angier Ave, NE, Atlanta, GA, 3	0308		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Other: Communication	Informational e	emails	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	in, TX, officeholder livin	g expense
Complete ONLY if direct expenditure to benefit C/Oh	Candidate / Officeholder name	Office sought		Office held
Date	Payee name			
9/20/2024	Mailchimp			
Amount (\$)	Payee address;	City;	State;	Zip Code
\$21.32	505 N Angier Ave, NE, Atlanta, GA, 30	0308		
	Category (See Categories listed at the top of this schedule)	Description		
PURPOSE OF EXPENDITURE	Other: Communication	Informational e	mails	
	Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living	g 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 NEE	EDED	

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

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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 Backing tived timens Loan Repayment Remoussement Office Overhead Rental Expense Sobotation/hundrasing Expense Transcontation Equipment & Related Expense from Beverage Expenses Travel In District Travel Oct. C. District ConsulingLypense Poling Expense Carintrations/Donations Made By GPI/Awards Morrantels Exempee Pentry Expans Candidate/Officeholds/Political Committee Legal Services Enterex/Wedney/Confract callor Other (enter a category not rated apolys) Direct Land Paperson The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1. 2 FILER NAME 3 Edge 1D (Etrics Commission Fiers) Placido Gomez 2 5 Payee name 4 Date 10/21/2024 Mailchimp 6 Amount (\$) 7 Payes address Oliv: State: Zip Code 505 N Angier Ave, NE, Atlanta, GA, 30308 \$21.32 (a) Callegory (See Catagories isted at the top of this schedule) (b) Clescopton я PURPOSE Informational emails Other: Communication EXPENDITURE Check Physiol Greats of Totals, Complete Schedule T Unack d Austin, TX, altermater being asperse Candidate / Officeholder name Office squart Office held 9 Complete QNLY if direct expenditure to basetit C/OH Payee name Mailchimp 11/20/2024 Amount (\$) Payee address; Olly. Zip Code 505 N Angier Ave, NE, Atlanta, GA, 30308 \$21,32 Calogory (See Categories intended the top of the authorise) Description Other: Communication Informational emails PURPOSE OF EXPENDITURE Unack / travel cutable of leases. Complete Editectife f. Uneck if Airstn. TX, office/ol/dat living expense Cardidate / Officeholder name Office sociality Office held Complete <u>CNLY</u> if drect expectiture to formfit C/OH Payer name Dester 12/20/2024 Mailchimp Amount (\$) Payeo address; City: State: Zip Cade 505 N Angier Ave, NE, Atlanta, GA, 30308 \$21.32 Catagory (See Catagores) isted anna top of the schedule. Denscrigition PURPOSE Other: Communication Informational emails OF EXPENDITURE Creck drawn purkteral lower Concepts School to 1 Check & Austri, EX. officetrator living expense Candidate / Officeholder name Office sought Office held Complete QNLY 4 direct expenditure to benefit C/OH ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED Revised 8/17/2020

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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

Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense 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

Candidate/Officeholder/Political Committee Legal Services Other (enter a category not listed above) The Instruction Guide explains how to complete this form. 2 FILER NAME 1 Total pages Schedule F4: 3 Filer ID (Ethics Commission Filers) 3 Placido Gomez 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date 6 Payee name Squarespace Inc. 7/26/2024 8 Payee address; 7 Amount (\$) City; State: Zip Code 8 Clarkson St, New York, NY, 10014 35.18 TYPE OF Political Non-Political **EXPENDITURE** (b) Description (a) Category (See Categories listed at the top of this schedule) 10 Other: Website Maintenance of political website. PURPOSE OF EXPENDITURE (c) 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 Date Payee name 8/26/2024 Squarespace Inc. Amount (\$) Payee address; City; State: Zip Code 8 Clarkson St, New York, NY, 10014 35.18 TYPE OF Political Non-Political **EXPENDITURE** Category (See Categories listed at the top of this schedule) Description Other: Website Maintenance of political website. **PURPOSE** OF **EXPENDITURE** 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

Advertising Expense Accepting Banking Consulting Expense Contributions/Denators Made b Candidata/Officehologic/Sofic	Fees Utilize Ove Food/Beversije Expense Poting Lis by Git/Westells/Mentells/s Expense Proting E	igmer tifterntenserrent ihend för far Espense pense gense AspesiCompact Labor	Solicitation/Funda sing Expense Transportation Equipment & Related Expens Fraud in District Fraud O.A.Of Definit Other (entire a calegory not rated above)
1 Total pages Schedule F4	2 FILER NAME Placido Gomez		3 Filler IO (Elhios Commasion Filles)
4 TOTAL OF UNITEM	IZED EXPENDITURES CHARGED TO A CR	REDIT CARD	\$
5 Date 9/26/2024	6 Payeo name Squarespace Inc.		L
7 Amount (\$) 38,38	8 Payee address; 8 Clarkson St, New York, NY, 10014	City,	State; Z⊕ Code
9 TYPE OF EXPENDITURE	Political Non-P	ofnica!	
10 PURPOSE OF EXPENDITURE	(a) Category (Sectategores Intel all the logist this selvebule) Other: Website	(b) Description Maintenance	of political website.
11 Complete <u>QNLY</u> if direct expenditure to benefit G/OH	Candidate / Officeholder name C	Mica sought	Office hold
Date 10/26/2024	Squarespace Inc.		
Amount [\$]	8 Clarkson St, New York, NY, 10014	Слу,	State; Z-p Code
TYPE OF EXPENDITURE	Political Non-P	oítical	
PURPOSE OF EXPENDITURE	Category (See Caregories field at the lay of this acheduse) Other: Website	Maintenance	e of political website.
	Clark Etravel sets de al Texas, Complete Schedule T	Chrck if Au	rith IX. officialistics complexions.
Complete QNLY if direct expenditure to benefit G/OH	Candidate / Officehi/der name C	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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Transportation Equipment & Related Entered in Control of Particle Commission
City, State; Zg Code City, State; Zg Code Polical (b) Description Maintenance of political website. Crash 1 Austro, 13 stituated to transpense Office sought City, State; Zip Code (ii) State; Zip Code
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