



# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME Emmanuel Guerrero		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)	\$ 16,140
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 7,458.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 26,495.47
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.

*Emmanuel Guerrero*

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 Emmanuel Guerrero, and my date of birth is [REDACTED]

My address is 1039 Willow Oaks, Pasadena, TX, 77506, USA  
(street) (city) (state) (zip code) (country)

Executed in Harris County, State of TX, on the 03 day of April, 20 25  
(month) (year)

*Emmanuel Guerrero*

Signature of Candidate/Officeholder (Declarant)

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

<b>19 FILER NAME</b> Emmanuel Guerrero		<b>20 Filer ID (Ethics Commission Filers)</b>
<b>21 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		<b>SUBTOTAL AMOUNT</b>
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 16,140
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		\$ 7,458.70
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: <b>15</b>
2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/18/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Je'Rell Rogers</b>	7 Amount of contribution (\$)  <b>\$25</b>
	6 Contributor address; City; State; Zip Code <b>Houston, TX 77007</b>	
8 Principal occupation / Job title (See Instructions) <b>Attorney</b>		9 Employer (See Instructions) <b>Harris County District Attorney's office</b>
Date <b>01/21/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rachael Levy</b>	Amount of contribution (\$)  <b>\$100</b>
	Contributor address; City; State; Zip Code <b>Houston, TX 77098</b>	
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>RG Levy Law, PLLC</b>
Date <b>01/28/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Andrew Burnett</b>	Amount of contribution (\$)  <b>\$25</b>
	Contributor address; City; State; Zip Code <b>Houston, TX 77071</b>	
Principal occupation / Job title (See Instructions) <b>Real estate agent</b>		Employer (See Instructions) <b>Compass</b>
Date <b>01/25/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Peter E Tarlow</b>	Amount of contribution (\$)  <b>\$25</b>
	Contributor address; City; State; Zip Code <b>College Station, TX 77840</b>	
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>01/30/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>HUITT-ZOLLARS, INC TEXAS PAC</b> 6 Contributor address; City; State; Zip Code <b>5430 LBJ Freeway, Suite 1500 Dallas, TX, 75240</b>	7 Amount of contribution (\$) <b>\$500</b>
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date <b>01/31/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Guadalupe Gonzales</b> Contributor address; City; State; Zip Code <b>Harlingen, TX 78552</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)
Date <b>01/31/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Marlene Vega</b> Contributor address; City; State; Zip Code <b>PASADENA TX 77503</b>	Amount of contribution (\$) <b>\$250</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>02/04/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Joshua Barvin</b> Contributor address; City; State; Zip Code <b>Houston, TX 77098</b>	Amount of contribution (\$) <b>\$180</b>
Principal occupation / Job title (See Instructions) <b>Commercial Development</b>		Employer (See Instructions) <b>1PointFive</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/05/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Oren Mushin</b> ..... 6 Contributor address; City; State; Zip Code <b>Houston, TX 77043</b>	7 Amount of contribution (\$)  <b>\$1,000</b>
8 Principal occupation / Job title (See Instructions) <b>Doctor</b>		9 Employer (See Instructions) <b>Self</b>
Date <b>02/06/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mitchel &amp; Diane Levy</b> ..... Contributor address; City; State; Zip Code <b>Bellaire, TX 77401</b>	Amount of contribution (\$)  <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)
Date <b>02/06/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Karthik Soora</b> ..... Contributor address; City; State; Zip Code <b>Houston, TX 77007</b>	Amount of contribution (\$)  <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Project developer</b>		Employer (See Instructions) <b>Pattern</b>
Date <b>02/07/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Griselda Sanchez</b> ..... Contributor address; City; State; Zip Code <b>Pasadena, TX 77506</b>	Amount of contribution (\$)  <b>\$500</b>
Principal occupation / Job title (See Instructions) <b>Sales</b>		Employer (See Instructions)
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2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/11/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Guillermo Moll</b>	7 Amount of contribution (\$)  <b>\$250</b>
	6 Contributor address; City; State; Zip Code <b>Houston, TX 77079</b>	
8 Principal occupation / Job title (See Instructions) <b>Consultant</b>		9 Employer (See Instructions)
Date <b>02/12/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Houston Apartment Association PAC</b>	Amount of contribution (\$)  <b>\$500</b>
	Contributor address; City; State; Zip Code <b>Houston, TX 77041</b>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Steven Halvorson</b>	Amount of contribution (\$)  <b>\$100</b>
	Contributor address; City; State; Zip Code <b>Pasadena, TX 77506</b>	
Principal occupation / Job title (See Instructions) <b>Lab Director</b>		Employer (See Instructions) <b>Baylor College of Medicine</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Anthony Rios</b>	Amount of contribution (\$)  <b>\$250</b>
	Contributor address; City; State; Zip Code <b>Houston, TX 77007</b>	
Principal occupation / Job title (See Instructions) <b>Financial Analyst</b>		Employer (See Instructions) <b>Dell</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

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4 Date <b>02/16/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Luis Lucio</b>	7 Amount of contribution (\$)  <b>\$250</b>
	6 Contributor address; City; State; Zip Code <b>Houston, TX 77073</b>	
8 Principal occupation / Job title (See Instructions) <b>Educator</b>		9 Employer (See Instructions) <b>Dallas College</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Bernie Aldape</b>	Amount of contribution (\$)  <b>\$250</b>
	Contributor address; City; State; Zip Code <b>Houston, TX 77089</b>	
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>Self Employed</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Saul Zarco</b>	Amount of contribution (\$)  <b>\$50</b>
	Contributor address; City; State; Zip Code <b>Houston, TX 77044</b>	
Principal occupation / Job title (See Instructions) <b>Educator</b>		Employer (See Instructions) <b>IDEA</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Fina Govea</b>	Amount of contribution (\$)  <b>\$100</b>
	Contributor address; City; State; Zip Code <b>Pasadena, TX 77503</b>	
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions)
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4 Date <b>02/16/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Eduardo Martinez</b> ----- 6 Contributor address; City; State; Zip Code <b>Pasadena, TX 77503</b>	7 Amount of contribution (\$)  <b>\$500</b>
8 Principal occupation / Job title (See Instructions) <b>Business Owner</b>		9 Employer (See Instructions) <b>Southern Texas Lawn services</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Herb Gray</b> ----- Contributor address; City; State; Zip Code <b>Houston, TX 77045</b>	Amount of contribution (\$)  <b>\$1,000</b>
Principal occupation / Job title (See Instructions) <b>Business Owner</b>		Employer (See Instructions) <b>Life Enhancement Svs</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Art Murillo</b> ----- Contributor address; City; State; Zip Code <b>Houston, TX 77060</b>	Amount of contribution (\$)  <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>public relations</b>		Employer (See Instructions) <b>Houston METRO</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Shamier Bouie</b> ----- Contributor address; City; State; Zip Code <b>Houston, TX 77004</b>	Amount of contribution (\$)  <b>\$25</b>
Principal occupation / Job title (See Instructions) <b>Not Employed</b>		Employer (See Instructions)
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4 Date <b>02/16/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Jennifer Perez</b> 6 Contributor address; City; State; Zip Code <b>Manvel, TX 77578</b>	7 Amount of contribution (\$) <b>\$100</b>
8 Principal occupation / Job title (See Instructions) <b>Broker</b>		9 Employer (See Instructions) <b>Texas Skyline Properties</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Danyahel Norris</b> Contributor address; City; State; Zip Code <b>Houston, TX 77044</b>	Amount of contribution (\$) <b>\$25</b>
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>City of Houston</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Nushin Roodgari</b> Contributor address; City; State; Zip Code <b>Sugar Land, TX 77498</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Self employed</b>		Employer (See Instructions)
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Sophia Alvarado</b> Contributor address; City; State; Zip Code <b>El Paso, TX 79935</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Account Manager</b>		Employer (See Instructions) <b>Three Missions Construction</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/16/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Kory Haywood</b> 6 Contributor address; City; State; Zip Code <b>Houston, TX 77061</b>	7 Amount of contribution (\$) <b>\$300</b>
8 Principal occupation / Job title (See Instructions) <b>Consultant</b>		9 Employer (See Instructions) <b>Self</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephen Alvarez</b> Contributor address; City; State; Zip Code <b>Pasadena, TX 77505</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>David Garza</b> Contributor address; City; State; Zip Code <b>Pearland, TX</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Law Enforcement</b>		Employer (See Instructions) <b>Pasadena Police Department</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Alisia Cardenas</b> Contributor address; City; State; Zip Code <b>PasadenaTexas,77506</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Business Development</b>		Employer (See Instructions) <b>SSB Roofing</b>
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2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>02/16/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ornaldo Ybarra</b> ..... 6 Contributor address; City; State; Zip Code <b>Pasadena, TX</b>	7 Amount of contribution (\$)  <b>\$100</b>
8 Principal occupation / Job title (See Instructions) <b>Police Officer</b>		9 Employer (See Instructions) <b>Pearland Police Department</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Rosa Ybarra</b> ..... Contributor address; City; State; Zip Code <b>Pasadena, TX 77506</b>	Amount of contribution (\$)  <b>\$50</b>
Principal occupation / Job title (See Instructions) <b>Patient Care specialist</b>		Employer (See Instructions) <b>HCA</b>
Date <b>02/16/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Stephanie T Wilkins</b> ..... Contributor address; City; State; Zip Code <b>Houston, TX</b>	Amount of contribution (\$)  <b>\$10</b>
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)
Date <b>02/17/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Marina Aldrete</b> ..... Contributor address; City; State; Zip Code <b>Deer Park, TX 77536</b>	Amount of contribution (\$)  <b>\$250</b>
Principal occupation / Job title (See Instructions) <b>Assistant Manager</b>		Employer (See Instructions) <b>Bryton Hill Apartments</b>
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2 FILER NAME Emmanuel Guerrero		3 Filer ID (Ethics Commission Filers)
4 Date 02/17/25	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Abigail Anastasio 6 Contributor address; City; State; Zip Code Houston, TX 77002	7 Amount of contribution (\$) \$250
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self
Date 02/18/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dani Hernandez Contributor address; City; State; Zip Code Houston, TX 77023	Amount of contribution (\$) \$50
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Framework Properties
Date 02/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haitham Baqdounes Contributor address; City; State; Zip Code Houston, TX 77034	Amount of contribution (\$) \$250
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Action Towing INC
Date 02/19/25	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amber Burton Alfred Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of contribution (\$) \$100
Principal occupation / Job title (See Instructions) HAR		Employer (See Instructions) Govt Affairs
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.		

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4 Date <b>02/21/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Gil Lopez</b> ..... 6 Contributor address; City; State; Zip Code <b>North Las Vegas, NV 89031</b>	7 Amount of contribution (\$) <b>\$100</b>
8 Principal occupation / Job title (See Instructions) <b>Executive Director</b>		9 Employer (See Instructions) <b>Nevada Latino Legislative Caucus</b>
Date <b>02/21/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Julio Fernandez</b> ..... Contributor address; City; State; Zip Code <b>Houston, TX 77036</b>	Amount of contribution (\$) <b>\$1,000</b>
Principal occupation / Job title (See Instructions) <b>President/Owner</b>		Employer (See Instructions) <b>Declaration Title</b>
Date <b>02/23/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Roberto Martinez</b> ..... Contributor address; City; State; Zip Code <b>Long Beach, CA 90806</b>	Amount of contribution (\$) <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Marketing</b>		Employer (See Instructions) <b>Self</b>
Date <b>02/23/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Crestina Martinez</b> ..... Contributor address; City; State; Zip Code <b>San Luis, CO 81152</b>	Amount of contribution (\$) <b>\$75</b>
Principal occupation / Job title (See Instructions) <b>Analyst</b>		Employer (See Instructions) <b>Xcel Energy</b>
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4 Date <b>02/24/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Priti Singh</b> ..... 6 Contributor address; City; State; Zip Code <b>Sugar Land, TX 77479</b>	7 Amount of contribution (\$) <b>\$1,500</b>
8 Principal occupation / Job title (See Instructions) <b>Owner</b>		9 Employer (See Instructions) <b>Associated testing</b>
Date <b>02/26/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Paul Nunu</b> ..... Contributor address; City; State; Zip Code <b>Pasadena, TX 77504</b>	Amount of contribution (\$) <b>\$150</b>
Principal occupation / Job title (See Instructions) <b>Attorney</b>		Employer (See Instructions) <b>Self</b>
Date <b>03/03/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Vicenter Soliz</b> ..... Contributor address; City; State; Zip Code <b>Lake Jackson, TX</b>	Amount of contribution (\$) <b>\$300</b>
Principal occupation / Job title (See Instructions) <b>Education Administration</b>		Employer (See Instructions)
Date <b>03/03/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Dani Hernandez</b> ..... Contributor address; City; State; Zip Code <b>Houston, TX 77023</b>	Amount of contribution (\$) <b>\$50</b>
Principal occupation / Job title (See Instructions) <b>Broker</b>		Employer (See Instructions) <b>Framework Properties</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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: <b>15</b>
2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>03/05/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>BERTON BROWN</b> ..... 6 Contributor address; City; State; Zip Code <b>Grand Blanc, MI 48439</b>	7 Amount of contribution (\$)  <b>\$250</b>
8 Principal occupation / Job title (See Instructions) <b>Government Affairs Executive</b>		9 Employer (See Instructions) <b>Warner Norcross Judd</b>
Date <b>03/06/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JOAQUIN MARTINEZ</b> ..... Contributor address; City; State; Zip Code <b>Houston, TX 77061</b>	Amount of contribution (\$)  <b>\$250</b>
Principal occupation / Job title (See Instructions) <b>City Councilmember</b>		Employer (See Instructions) <b>City of Houston</b>
Date <b>03/20/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Simon Tafoya</b> ..... Contributor address; City; State; Zip Code <b>Denver, CO 80204</b>	Amount of contribution (\$)  <b>\$100</b>
Principal occupation / Job title (See Instructions) <b>Consulting</b>		Employer (See Instructions) <b>Self</b>
Date <b>03/23/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Saul Garcia</b> ..... Contributor address; City; State; Zip Code <b>McAllen, TX 78504</b>	Amount of contribution (\$)  <b>\$250</b>
Principal occupation / Job title (See Instructions) <b>Consultant</b>		Employer (See Instructions) <b>Saora LLC</b>
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b> 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: <b>15</b>
2 FILER NAME <b>Emmanuel Guerrero</b>		3 Filer ID (Ethics Commission Filers)
4 Date <b>03/24/25</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Mike Lowenberg</b>	7 Amount of contribution (\$) <b>\$1,000</b>
6 Contributor address; City; State; Zip Code <b>Katy, TX 77494</b>		
8 Principal occupation / Job title (See Instructions) <b>Lawyer</b>		9 Employer (See Instructions) <b>Self</b>
Date <b>03/24/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>Ricky Gonzalez</b>	Amount of contribution (\$) <b>\$250</b>
Contributor address; City; State; Zip Code <b>Richmond, TX 77406</b>		
Principal occupation / Job title (See Instructions) <b>Exec VP</b>		Employer (See Instructions) <b>Kuo &amp; Associates, LLC</b>
Date <b>03/26/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>JOHNNY ISBELL</b>	Amount of contribution (\$) <b>\$500</b>
Contributor address; City; State; Zip Code <b>Pasadena, TX 77501</b>		
Principal occupation / Job title (See Instructions) <b>Retired</b>		Employer (See Instructions)
Date <b>03/26/25</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <b>KP George Campaign</b>	Amount of contribution (\$) <b>\$500</b>
Contributor address; City; State; Zip Code <b>PO BOX 18711 Sugar Land, TX 77496</b>		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: <b>15</b>
2 FILER NAME <p style="text-align: center;">Emmanuel Guerrero</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align: center;">03/31/25</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Massey Villarreal</p> <hr style="border-top: 1px dotted black;"/> <p>6 Contributor address; City; State; Zip Code <p style="text-align: center;">Sugar Land, TX 77479</p></p>	7 Amount of contribution (\$) <p style="text-align: center;">\$1,000</p>
8 Principal occupation / Job title (See Instructions) <p style="text-align: center;">Business owner</p>		9 Employer (See Instructions) <p style="text-align: center;">PTF</p>
Date <p style="text-align: center;">04/01/25</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Ipsum General Contractors LLC</p> <hr style="border-top: 1px dotted black;"/> <p>Contributor address; City; State; Zip Code <p style="text-align: center;">Houston, TX 77012</p></p>	Amount of contribution (\$) <p style="text-align: center;">\$500</p>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr style="border-top: 1px dotted black;"/> <p>Contributor address; City; State; Zip Code</p>	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr style="border-top: 1px dotted black;"/> <p>Contributor address; City; State; Zip Code</p>	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p><b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b></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.

<b>1</b> Total pages Schedule F1: 4	<b>2</b> FILER NAME Emmanuel Guerrero	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/15/25	<b>5</b> Payee name Two Four Consulting	
<b>6</b> Amount (\$) \$2,500	<b>7</b> Payee address; City; State; Zip Code 1013 W Ellaine Ave Pasadena, TX 77506	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<b>(b)</b> Description
	<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 01/15/25	Payee name Ornaldo Ybarra Campaign	
Amount (\$) \$1,000	Payee address; City; State; Zip Code Pasadena, TX	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contribution made to Candidate	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 Ornaldo Ybarra	Office sought      Office held Pasadena Mayor      Pasadena City Council District G

Date 01/16/25	Payee name Area 5	
Amount (\$) \$1,000	Payee address; City; State; Zip Code 3800 Spencer Hwy, Ste L, Pasadena, TX, United States, Texas	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Gift Expense	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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# 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.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME Emmanuel Guerrero	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 01/16/25	<b>5</b> Payee name White Rhino	
<b>6</b> Amount (\$) \$350	<b>7</b> Payee address; City; State; Zip Code 319 Milby St Houston, TX 77003	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description event space rental
	<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 01/18/25	Payee name JiffyShirts.com	
Amount (\$) \$90	Payee address; City; State; Zip Code 1000 N. West St. Suite 1200 Wilmington, DE 19801	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Campaign shirts
	<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 02/10/25	Payee name UZ Marketing	
Amount (\$) \$ 416.85	Payee address; City; State; Zip Code 5900 Bingle Rd., Houston, TX 77092	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	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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# 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.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME <b>Emmanuel Guerrero</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>02/16/25</b>	<b>5</b> Payee name <b>Juan Lopez</b>	
<b>6</b> Amount (\$) <b>\$250</b>	<b>7</b> Payee address; City; State; Zip Code <b>Houston, TX</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Event Expense</b>	<b>(b)</b> Description <b>DJ Service</b>
	<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
<b>Date</b> <b>03/08/25</b>	<b>Payee name</b> <b>La Guadalupana 2 Bakery &amp; Cafe</b>	
<b>Amount (\$)</b> <b>\$99.93</b>	<b>Payee address; City; State; Zip Code</b> <b>4690 Burke Rd Suite 160, Pasadena, TX 77504</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> <b>Food/beverage Expense</b>	<b>Description</b>
	<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
<b>Date</b> <b>03/25/25</b>	<b>Payee name</b> <b>Grant Martin Campaigns</b>	
<b>Amount (\$)</b> <b>\$1,082.50</b>	<b>Payee address; City; State; Zip Code</b> <b>San Francisco, CA 94115</b>	
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> <b>Consulting Expense</b>	<b>Description</b>
	<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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# 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.

<b>1</b> Total pages Schedule F1: <b>4</b>	<b>2</b> FILER NAME <b>Emmanuel Guerrero</b>	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date <b>03/25/25</b>	<b>5</b> Payee name <b>Two Four Consulting</b>	
<b>6</b> Amount (\$) <b>250</b>	<b>7</b> Payee address; City; State; Zip Code <b>1013 W Ellaine Ave Pasadena, TX 77506</b>	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) <b>Consulting</b>	<b>(b)</b> Description
	<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 <b>04/03/25</b>	Payee name <b>ACT Blue</b>	
Amount (\$) <b>419.42</b>	Payee address; City; State; Zip Code <b>366 Summer Street, Somerville, MA 02144</b>	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) <b>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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<b>PURPOSE OF EXPENDITURE</b>	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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