JUDICIAL CANDIDATE / OFFICEHOLDER FORM JC/OH **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: The JC/OH Instruction Guide explains how to complete this form. 8 MS / MRS / MR 3 CANDIDATE / FIRST MI OFFICE USE ONLY **OFFICEHOLDER** S Mr. Andrew NAME Date Received NICKNAME LAST SUFFIX Dornburg 4 CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; STATE; ZIP CODE **OFFICEHOLDER** 77471 Rosenberg TX P.O. Box 482 MAILING **ADDRESS** OCT 31 2022 FCVD Change of Address AREA CODE PHONE NUMBER EXTENSION 5 CANDIDATE/ Date Hand-delivered or Date Postmarked **OFFICEHOLDER** (346)808-0429 PHONE Receipt # Amount \$ MS / MRS / MR FIRST 6 CAMPAIGN **TREASURER** Paul Mг. Date Processed NAME NICKNAME LAST SUFFIX Date Imaged Wyman STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY: STATE; ZIP CODE 7 CAMPAIGN **TREASURER** 77494 26815 Sandy Arbor Lane Katy TX **ADDRESS** (Residence or Business) PHONE NUMBER **EXTENSION** 8 CAMPAIGN AREA CODE **TREASURER** PHONE (337) 241-8820 9 REPORT TYPE 15th day after campaign Runoff January 15 30th day before election treasurer appointment (Officeholder Only) **Exceeded Modified** Final Report (Attach C/OH - FR) July 15 8th day before election Reporting Limit 10 PERIOD Month Day Year Day Year Month COVERED 30 2022 10 2022 09 THROUGH ELECTION TYPE **ELECTION DATE** 11 ELECTION Primary Runoff Other Month Day Description X General 08 / 2022 13 OFFICE SOUGHT (if known) OFFICE HELD (if any) 12 OFFICE Judge, Fort Bend County Court at Law #3 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. 14 NOTICE FROM **POLITICAL** COMMITTEE(S) COMMITTEE TYPE COMMITTEE NAME COMMITTEE ADDRESS GENERAL Additional Pages COMMITTEE CAMPAIGN TREASURER NAME SPECIFIC COMMITTEE CAMPAIGN TREASURER ADDRESS **GO TO PAGE 2**

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 2

EXPENDITURE TOTALS CONTRIBUTION BALANCE OUTSTANDING LOAN TOTALS 18 SIGNATURE I swear,	TOTAL UNITEMIZED POL PLEDGES, LOANS, OR GI CONTRIBUTIONS MADE IS TOTAL POLITICAL CON (OTHER THAN PLEDGES, TOTAL UNITEMIZED POLI TOTAL POLITICAL EXPI TOTAL POLITICAL CONTR OF REPORTING PERIOD TOTAL PRINCIPAL AMOUN LAST DAY OF THE REPORT TO affirm, under penalty of perjur to be reported by me under Title 1	NT OF ALL OUTSTANDING PERIOD NT OF ALL OUTSTANDING PERIOD	O AS OF THE LANG LOANS AS	AST DAY OF THE	1/	.73 08 00
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	to be reported by me under Title 1	15, Election Code.	U		1/	des all informatio
(1) Affidavit NOTARY STAMP/SEAL Swom to and subscribed before	Marcia D Ubernot My Commission Exp 8/31/2026 Notary ID1339409 Te me by ANOCEN 1	osky pires 930			<u>,</u> day of <u>0</u>	Chober
20 <u>22</u> , to certify whic	h, witness my hand and seal of office					
Marca Utra Signature of officer administering of		of officer administering oat	th		Title of office	r administering oat
(2) Unsworn Declaration		OR				
My name is		, and my	y date of birth	is		
My address is						
,				······································		,
•	(street) County, State of	(0		,	(zip code) , 20(year)	(country)

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

19	FILER NAME 20 Filer ID (Ethics Co			ommission Filers)	
	Andrew S.	. Dornburg			
	21 SCHEDULE SUBTOTALS NAME OF SCHEDULE			SUBTOTAL AMOUNT	
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			\$ 2,600.00	
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			\$	
3.	. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$	
4.	SCHEDULE E: LOANS		\$		
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS			\$ 1,210.73	
6.	S. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$	
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS			\$	
8.	3. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$	
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS		\$		
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH		\$		
11.	SCHE	EDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CO	NTRIBUTIONS	\$	
12.	SCHE	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

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

The state of the s			
Т	he Instruction Guide explains how to complete this fo	orm.	1 Total pages Schedule A(J)1: 2
2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
Andrew Do	ornbura		
4 Date			7 Amount of contribution (\$)
10/11/22	5 Full name of contributor out-of-state PAC I	D#:)	\$2,000.00
10/11/22	Republican Party of Texas		\$2,000.00
	6 Contributor address; City;	State; Zip Code	
	807 Brazos, Suite 701 Austin	TX 78701	
8 Contributor's p	rincipal occupation	9 Contributor's job title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor	's spouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor	D#:)	Amount of contribution (\$)
10/7/22	Matthew Dangel	\$250.00	
	Contributor address; City;	State; Zip Code	\$250.00
	2622 Stephens Grant Drive Sugar Land		
Contributor's r	principal occupation	Contributor's job title	
Engineer		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Contributor's	mployer/law firm	Law firm of contributor	's spouse (if any)
Hilcorp Ene	rgy		
If contributor is	s a child, law firm of parent(s) (if any)		
			- Part I
Date	Full name of contributor	D#:)	Amount of contribution (\$)
	Mark Standlee		
10/7/22			\$250.00
10,7,22	Contributor address; City;	State: Zip Code	
	2126 Walnut Grove Lane Richmond	TX 77406	
Contributor's p	principal occupation	Contributor's job title	
Engineer			
Contributor's	employer/law firm	Law firm of contributo	r's spouse (if any)
Chevron			
If contributor is	s a child, law firm of parent(s) (if any)		
			The second secon

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 (JUDICIAL)

SCHEDULE A(J)1

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 A(J)1: 2
2 FILER NAME Andrew Dornburg	3 Filer ID (Ethics Commission Filers)
4 Date 10/27/22 5 Full name of contributor out-of-state PAC ID#: David Ryan 6 Contributor address; City; State; Zip Code 6161 Savoy Dr., Suite 1116 Houston TX 77036	7 Amount of contribution (\$) \$100.00
8 Contributor's principal occupation Attorney 9 Contributor's job title Attorney	
10 Contributor's employer/law firm Ryan and Associates 11 Law firm of contributor's employer/law firm of contributor's Ryan and Associates	s spouse (if any)
Date Full name of contributor	Amount of contribution (\$)
Contributor's principal occupation Contributor's job title	
Contributor's employer/law firm Law firm of contributor'	s spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	
Date Full name of contributor out-of-state PAC ID#:	Amount of contribution (\$)
Contributor address; City; State: Zip Code	
Contributor's principal occupation Contributor's job title	
Contributor's employer/law firm Law firm of contributor'	s spouse (if any)
If contributor is a child, law firm of parent(s) (if any)	

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

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

Event Expense Fees Food/Beverage Expense Gitt/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 shove)

Total access Cabadala Ed	2 FILED MANE		2 51- 15 (51)		
Total pages Schedule F1:	Andrew Dornburg		3 Filer ID (Ethics Commission Filer		
Date	5 Payee name				
9/30/22-10/7/22	Amegy Bank				
Amount (\$)	7 Payee address;	City;	State; Zip Code		
\$10.00	P.O. Box 27459	Houston	TX 77227		
	(a) Category (See Categories listed at the top of this schedule)	(b) Description			
PURPOSE	Accounting/Banking	Banking Charges/Fees			
OF EXPENDITURE					
	(c) Check if travel outside of Texas. Complete Schedule T.	Check if Austi	n, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OF	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name		- Parks		
10/12/22-10/13/22	Stripe Payments Company				
Amount (\$)	Payee address;	City;	State; Zip Code		
\$15.10	354 Oyster Point Boulevard	South San Francis	sco CA 94080		
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Accounting/Banking Credit (Processing		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austir	ustin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held		
Date	Payee name	And the second s	April 10 Company Compa		
10/7/22	Fort Bend County Republican Party				
Amount (\$)	Payee address;	City;	State; Zip Code		
\$1,000.00	P.O. Box 461	Sugar Land	TX 77487		
	Category (See Categories listed at the top of this schedule)	Description			
PURPOSE OF EXPENDITURE	Contribution made by candidate	FBC GOP Do	onation		
	Check if travel outside of Texas. Complete Schedule T.	Check if Austin	, TX, officeholder living expense		
		Office sought	Office held		

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 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 shove)

Amount (\$) Payee address; \$38.97 225 Varrick Street, 12th Floo Category (See Categories listed at the top o	Push Cards Push Cards Check if Austin, TX, officeholder living a Office sought City; State; New York NY	Zip Code 76011		
Amount (\$) PrintPlace.com 7 Payee address; 1130 Avenue H East (a) Category (See Categories listed at the top Advertising Expense (c) Check if travel outside of Texas. Com Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Payee name Squarespace Amount (\$) Payee address; 225 Varrick Street, 12th Floor Category (See Categories listed at the top of Category (See Categories listed at the Ca	Arlington TX of this schedule) (b) Description Push Cards Check if Austin, TX, officeholder living a Complete Schedule T. City; State; New York NY	76011 expense Office held Zip Code		
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Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Squarespace Amount (\$) Payee address; 225 Varrick Street, 12th Floor Category (See Categories listed at the top of squarespace)	Office sought City; State; New York NY	Office held		
Complete ONLY if direct expenditure to benefit C/OH Date Payee name 10/7/22 Squarespace Amount (\$) Payee address; \$38.97 225 Varrick Street, 12th Floor Category (See Categories listed at the top of	Office sought C City; State; Or New York NY	Office held		
expenditure to benefit C/OH Date	City; State; or New York NY	Zip Code		
Amount (\$) Payee address; \$38.97 225 Varrick Street, 12th Floor Category (See Categories listed at the top of	or New York NY			
Amount (\$) Payee address; \$38.97 225 Varrick Street, 12th Floo Category (See Categories listed at the top o	or New York NY			
\$38.97 225 Varrick Street, 12th Floor Category (See Categories listed at the top of	or New York NY			
Category (See Categories listed at the top o		10014		
PUPPOSE	f this schedule) Description			
PURPOSE Advertising Expense				
OF Advertisng Expense EXPENDITURE	Website Expenses	Website Expenses		
Check if travel outside of Texas. Com	plete Schedule T. Check if Austin, TX, officeholder living e	expense		
Complete ONLY if direct candidate / Officeholder name expenditure to benefit C/OH	Office sought C	Office held		
Date Payee name		and the same of th		
Amount (\$) Payee address;	City; State;	Zip Code		
Category (See Categories listed at the top of PURPOSE OF	f this schedule) Description			
Check if travel outside of Texas. Comp	olete Schedule T. Check if Austin, TX, officeholder living e	expense		
Complete ONLY if direct Candidate / Officeholder name		Office held		

OUTSTANDING LOANS

SCHEDULE L

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

The	e Instruction Guide explains how to complete this form.	1 To 1	tal pages Sched	ule L:
2 FILER NAME		3 F	iler ID (Ethics C	ommission Filers)
Andrew Dornbu	urg			
LENDER	4 Name of lender			
INFORMATION	Andrew Dornburg			
	5 Lender address;	City;	State;	Zip Code
	P.O. Box 482	Rosenberg	TX	77471
GUARANTOR INFORMATION	6 Name of guarantor			de la la grande de la companya de l
🛚 not applicable	7 Guarantor address;	City;	State;	Zip Code
LENDER INFORMATION	Name of lender			
	Lender address;	City;	State;	Zip Code
GUARANTOR INFORMATION	Name of guarantor			
not applicable	Guarantor address;	City;	State;	Zip Code
LENDER INFORMATION	Name of lender			
	Lender address;	City;	State;	Zip Code
GUARANTOR INFORMATION	Name of guarantor			
not applicable	Guarantor address;	City;	State;	Zip Code
LENDER INFORMATION	Name of lender			
	Lender address;	City;	State;	Zip Code
GUARANTOR INFORMATION	Name of guarantor			
not applicable	Guarantor address;	City;	State;	Zip Code
	ATTACH ADDITIONAL COPIES OF THIS	SCHEDULE AS NEED	ED	