

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00084534	2 Total pages filed: 53
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Oscar M.	MI MI
	NICKNAME	LAST Telfair	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 7011 Harwin Drive Ste 220 Houston, TX 77036		ZIP CODE
	Date Hand-delivered or Date Postmarked JAN 14 2022 RCVD		
	Receipt #	Amount	
	Date Processed		
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST MICHAEL	MI K
	NICKNAME	LAST STEWART	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 320 E. 24TH ST	APT / SUITE #;	CITY; STATE; ZIP CODE HOUSTON TX 77008
7 CAMPAIGN TREASURER PHONE	AREA CODE 832	PHONE NUMBER 622-8053	EXTENSION
8 REPORT TYPE	<input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 07/01/2021	THROUGH	Month Day Year 12/31/2021
10 ELECTION	ELECTION DATE Month Day Year 03/01/2022		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special
	11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) Statutory County Judge Place Fort Bend C

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Telfair, Oscar M. 14 Filer ID (Ethics Commission Filers)
00084534

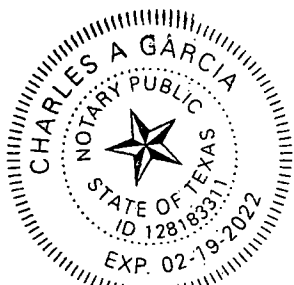
15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 3,933.96
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 23,349.26
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 22,056.77
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 5,550.33
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFIDAVIT



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.

Oscar Telfair

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said OSCAR TELFAIR, this the 14th day of JANUARY, 2022, to certify which, witness my hand and seal of office.

Charles A Garcia

Signature of officer administering oath

CHARLES A. GARCIA

Printed name of officer administering oath

Notary Public

Title of officer administering oath

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

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18 FILER NAME Telfair, Oscar M.	19 Filer ID 00084534	(Ethics Commission Filers)
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/>	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 23,349.26
2. <input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3. <input type="checkbox"/>	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4. <input type="checkbox"/>	SCHEDULE E(J): LOANS (JUDICIAL)	\$
5. <input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 22,056.77
6. <input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7. <input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8. <input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9. <input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10. <input type="checkbox"/>	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11. <input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12. <input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/28 Rpt: 4/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/07/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Tophas (Mr.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City, State; Zip Code 14811 Tumbling Falls Ct Houston, TX 77062		
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ardoin, Raymond (Mr.)	Amount of Contribution (\$) \$150.00
Contributor address; City, State; Zip Code 2223 Alassio Isle Ct. Missouri City, TX 77459		
Contributor's Principal Occupation Retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Tony	Amount of Contribution (\$) \$100.00
Contributor address; City, State; Zip Code 2004 Baxter Ln Franklin, TN 37069		
Contributor's Principal Occupation accounting		Contributor's Job Title accountant
Contributor's employer/law firm Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/28 Rpt: 5/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 10/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Prince	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 7955 Fawn Terrace Dr Houston, TX 77071		
8 Contributor's Principal Occupation Legal		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Lanease (Ms.)	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 4615 Southwest Freeway Suite 820 Houston, TX 77027		
Contributor's Principal Occupation Legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Lanease (Ms.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4615 Southwest Freeway Suite 820 Houston, TX 77027		
Contributor's Principal Occupation Legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/28 Rpt: 6/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fuller, Lanease (Ms.)	7 Amount of Contribution (\$) \$610.00
	6 Contributor address; City; State; Zip Code 4615 Southwest Freeway Suite 820 Houston, TX 77027	
8 Contributor's Principal Occupation Legal		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/25/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gatewood, Bernard	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code P O Box 61358 Fairbanks, AK 99706	
Contributor's Principal Occupation government		Contributor's Job Title analyst
Contributor's employer/law firm State of Alaska		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gautier, Byron (Mr.)	Amount of Contribution (\$) \$430.00
	Contributor address; City; State; Zip Code 2606 Atlas Drive Missouri City, TX 77459	
Contributor's Principal Occupation sales		Contributor's Job Title Trainer
Contributor's employer/law firm Aspen Technical		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/28 Rpt: 7/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/07/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gautier, Byron (Mr.)	7 Amount of Contribution (\$) \$402.50
6 Contributor address; City; State; Zip Code 2606 Atlas Drive Missouri City, TX 77459		
8 Contributor's Principal Occupation sales		9 Contributor's Job Title salesman
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/13/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibson, Mark (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6307 Penhallow Ln Missouri City, TX 77459		
Contributor's Principal Occupation Funeral Services		Contributor's Job Title Director
Contributor's employer/law firm Wells Funeral Services		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/29/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilmore, Joseph	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 13515 Hollow Log Dr Upper Marlboro, MD 20774		
Contributor's Principal Occupation religion		Contributor's Job Title pastor
Contributor's employer/law firm church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/28 Rpt: 8/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 07/03/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobs, Jacquetta (Ms.) <hr/> 6 Contributor address; City; State; Zip Code 8205 Rambling Rose Ln Laurel, MD 20724	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation Program Management		9 Contributor's Job Title manager
10 Contributor's employer/law firm day care		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Denice <hr/> Contributor address; City; State; Zip Code 5608 Roanoke Dr Frisco, TX 75033	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation childcare		Contributor's Job Title manager
Contributor's employer/law firm Dal4Kids		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Orjanel (Miss) <hr/> Contributor address; City; State; Zip Code 4111 North Creekmont Dr Fresno, TX 77545	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/28 Rpt: 9/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/07/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marcus, Vernelle (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 5107 Peridot Parkway Stonebridge, GA 30281	
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGill, LB	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2347 Broadgreen dr Missouri City, TX 77489	
Contributor's Principal Occupation photography		Contributor's Job Title owner
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Netherly, Jeramaine (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1114 Leadenhall Circle Channelview, TX 77530	
Contributor's Principal Occupation Accounting		Contributor's Job Title director
Contributor's employer/law firm kpmg		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/28 Rpt: 10/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/07/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Netherly, Jeramaine (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 1114 Leadenhall Circle Channelview, TX 77530	
8 Contributor's Principal Occupation Accounting		9 Contributor's Job Title director
10 Contributor's employer/law firm kpmg		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Netherly, Jeramaine (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1114 Leadenhall Circle Channelview, TX 77530	
Contributor's Principal Occupation Accounting		Contributor's Job Title director
Contributor's employer/law firm kpmg		Law firm of contributor's spouse (if any)
if contributor is a child, law firm of parent(s) (if any)		
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Walter (Mr.)	Amount of Contribution (\$) \$152.50
	Contributor address; City; State; Zip Code 3623 La Costa Rd. Missouri City, TX 77459	
Contributor's Principal Occupation Retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/28 Rpt: 11/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 08/04/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Kenneth (Mr.) <hr/> 6 Contributor address; City; State; Zip Code 1108 Bayou Rd LaMarque, TX 77568	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Insurance		9 Contributor's Job Title owner
10 Contributor's employer/law firm State Farm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Kenneth (Mr.) <hr/> Contributor address; City; State; Zip Code 1108 Bayou Rd LaMarque, TX 77568	Amount of Contribution (\$) \$610.00
Contributor's Principal Occupation Insurance		Contributor's Job Title owner
Contributor's employer/law firm state farm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simmons, simmons <hr/> Contributor address; City; State; Zip Code 806 chateau place richmond, TX 77469	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation consulting		Contributor's Job Title owner
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form. **1** Total pages Schedule A(J)1:
Sch: 9/28 Rpt: 12/53

2 FILER NAME
Telfair, Oscar M. **3** Filer ID (Ethics Commission Filers)
00084534

4 Date 07/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Margaret	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City, State; Zip Code 1428 Haddon Rd Columbus, OH 43209		

8 Contributor's Principal Occupation legal	9 Contributor's Job Title attorney
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10 Contributor's employer/law firm self	11 Law firm of contributor's spouse (if any)
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12 If contributor is a child, law firm of parent(s) (if any):

Date 08/30/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Margaret	Amount of Contribution (\$) \$100.00
Contributor address; City, State; Zip Code 1428 Haddon Rd Columbus, OH 43209		

Contributor's Principal Occupation legal	Contributor's Job Title attorney
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Contributor's employer/law firm self	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any):

Date 08/04/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spurling, Dennis	Amount of Contribution (\$) \$1,000.00
Contributor address; City, State; Zip Code 3003 S Loop W ste 400 Houston, TX 77054		

Contributor's Principal Occupation legal	Contributor's Job Title owner
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Contributor's employer/law firm self	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any):

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/28 Rpt: 13/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 07/17/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telfair, Oscar	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 7011 Harwin ste 220 Houston, TX 77036		
8 Contributor's Principal Occupation attorney		9 Contributor's Job Title owner
10 Contributor's employer/law firm Telfair Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/17/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telfair, Oscar	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 7011 Harwin ste 220 Houston, TX 77036		
Contributor's Principal Occupation attorney		Contributor's Job Title attorney
Contributor's employer/law firm The Telfair Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Telfair, Tosheka (Miss)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 21 Leonard Ave Millville, NJ 08332		
Contributor's Principal Occupation Daycare		Contributor's Job Title owner
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/28 Rpt: 14/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/07/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Ralphaell (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 4606 San Jacinto St Houston, TX 77004	
8 Contributor's Principal Occupation Legal		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Ronald (Mr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 713 Pin Oak Dr Friendswood, TX 77546	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williamson, Ronald (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 713 Pin Oak Dr Friendswood, TX 77546	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:
Sch: 12/28 Rpt: 15/53

2 FILER NAME
Telfair, Oscar M.

3 Filer ID (Ethics Commission Filers)
00084534

4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Rodney (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 8706 Crown Jewell Dr Richmond, TX 77469	

8 Contributor's Principal Occupation Business Mgr	9 Contributor's Job Title owner
--	------------------------------------

10 Contributor's employer/law firm diamond dialysis	11 Law firm of contributor's spouse (if any)
--	--

12 If contributor is a child, law firm of parent(s) (if any)

Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) allen, errol	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3461 lydia st houston, TX 77021	

Contributor's Principal Occupation government	Contributor's Job Title analyst
--	------------------------------------

Contributor's employer/law firm NASA	Law firm of contributor's spouse (if any)
---	---

If contributor is a child, law firm of parent(s) (if any)

Date 07/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) armwood, alonzo	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 14506 fenlan ct sugar land, TX 77498	

Contributor's Principal Occupation retired	Contributor's Job Title retired
---	------------------------------------

Contributor's employer/law firm retired	Law firm of contributor's spouse (if any)
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If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/28 Rpt: 16/53
2 FILER NAME Teffair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 10/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) baptiste, marie	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 6400 gessner houston, TX 77036		
8 Contributor's Principal Occupation medical		9 Contributor's Job Title doctor
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) baptiste, marie	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 6400 gessner houston, TX 77036		
Contributor's Principal Occupation medical		Contributor's Job Title doctor
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/11/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) beall-wilkins, rakel	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code 4218 abigail way sugar land, TX 77479		
Contributor's Principal Occupation medical		Contributor's Job Title doctor
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/28 Rpt: 17/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 11/18/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) benton, frederick	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code 98 hamilton park columbus, OH 43203	
8 Contributor's Principal Occupation legal		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) berg, matt	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 3982 inglewood cir missouri city, TX 77459	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) bobrick, william	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 744 brooks st sugar land, TX 77478	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/28 Rpt: 18/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 10/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) booker, leon	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 12106 segrest dr houston, TX 77047		
8 Contributor's Principal Occupation real estate		9 Contributor's Job Title sales
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) celestine, ronald	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2808 berry st houston, TX 77004		
Contributor's Principal Occupation sales		Contributor's Job Title manager
Contributor's employer/law firm General Mills		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) collins, eric	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 408 Crimson Coast league city, TX 77573		
Contributor's Principal Occupation trucking		Contributor's Job Title owner
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/28 Rpt: 19/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers): 00084534
4 Date 12/07/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) cooper, princess	7 Amount of Contribution (\$) \$1,255.00
	6 Contributor address; City; State; Zip Code 950 echo ln ste 200 houston, TX 77024	
8 Contributor's Principal Occupation day care		9 Contributor's Job Title administrator
10 Contributor's employer/law firm a better adult daycare		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) covort, le rondel	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3946 w creek club dr houston, TX 77091	
Contributor's Principal Occupation legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) dickens, felicia	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code 2231 primwood ct pearland, TX 77584	
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/28 Rpt: 20/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 07/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) dowdell, phillip	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 255a rutgers rd piscataway, NJ 08854	
8 Contributor's Principal Occupation photography		9 Contributor's Job Title owner
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) gantt, karen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 124 farmington ches cres farmington, CT 06032	
Contributor's Principal Occupation education		Contributor's Job Title professor
Contributor's employer/law firm University of Hartford		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) grant, george	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 11814 gladewood ln houston, TX 77071	
Contributor's Principal Occupation non profit		Contributor's Job Title manager
Contributor's employer/law firm non profit		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/28 Rpt: 21/53
2 FILER NAME Tefair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 10/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) harris, michael	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 2230 riverside dr houston, TX 77004	
8 Contributor's Principal Occupation consulting		9 Contributor's Job Title owner
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hopkins, glenda	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 2611 larkdale dr pearland, TX 77584	
Contributor's Principal Occupation non profit		Contributor's Job Title director
Contributor's employer/law firm Brentwood community fun		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) hughes, geneane	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 401 jackson st richmond, TX 77469	
Contributor's Principal Occupation law enforcement		Contributor's Job Title deputy constable
Contributor's employer/law firm ft bend county		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 19/28 Rpt: 22/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 08/31/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) humber, april	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 6421 english ivy way springfield, VA 22152		
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/04/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jack, ricky	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 22136 westheimer parkway katy, TX 77450		
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) james, darnell	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4315 stonebrook ln missouri city, TX 77459		
Contributor's Principal Occupation recruiting		Contributor's Job Title owner
Contributor's employer/law firm j&j		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/28 Rpt: 23/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) james, darnell 6 Contributor address; City; State; Zip Code 4315 stonebrook ln missouri city, TX 77459	7 Amount of Contribution (\$) \$600.00
8 Contributor's Principal Occupation recruiting		9 Contributor's Job Title owner
10 Contributor's employer/law firm j&j		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jamison, george Contributor address; City; State; Zip Code 3430 vineyard hill rochester hills, MI 48306	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) johnson, harry Contributor address; City; State; Zip Code 10700 richmond ave ste 265 houston, TX 77042	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 21/28 Rpt: 24/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 11/18/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jones, april	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 8506 rose garden dr houston, TX 77083		
8 Contributor's Principal Occupation consulting		9 Contributor's Job Title owner
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) jones, omar	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3018 ashton park dr pearland, TX 77584		
Contributor's Principal Occupation audit		Contributor's Job Title auditor
Contributor's employer/law firm Dept of Justice		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) laster, reggie	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 303 john randal dr middletown , DE 19709		
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 22/28 Rpt: 25/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) latham, warren	7 Amount of Contribution (\$) \$152.50
	6 Contributor address; City; State; Zip Code 2401 lost bridge lane pearland, TX 77027	
8 Contributor's Principal Occupation energy		9 Contributor's Job Title director
10 Contributor's employer/law firm tas energy, inc		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) lee, jimmie	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 12310 oak leaf bend humble, TX 77346	
Contributor's Principal Occupation food truck		Contributor's Job Title owner
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) malone, edwin	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code mem hermann 27800 hwy 6 cypress, TX 77433	
Contributor's Principal Occupation medical		Contributor's Job Title doctor
Contributor's employer/law firm memorial Hermann cypress		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 23/28 Rpt: 26/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 10/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) mitchell, mychael	7 Amount of Contribution (\$) \$150.00
6 Contributor address; City; State; Zip Code 2208 morse st houston, TX 77019		
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) palmer, andrew	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 10107 mill pt missouri city, TX 77459		
Contributor's Principal Occupation retired		Contributor's Job Title retired
Contributor's employer/law firm retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) payne, jason	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3828 bellefontaine st houston, TX 77025		
Contributor's Principal Occupation legal		Contributor's Job Title attorney
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 24/28 Rpt: 27/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 09/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) riley, bruce	7 Amount of Contribution (\$) \$197.80
	6 Contributor address; City; State; Zip Code 1274 hwy 77 bridgeton, NJ 08302	
8 Contributor's Principal Occupation sales		9 Contributor's Job Title salesman
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) robinson, shuronda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1706 overhill dr austin, TX 78721	
Contributor's Principal Occupation public relations		Contributor's Job Title owner
Contributor's employer/law firm Adisa public relations		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) sajjad, muzzammil	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code 10862 redstone ct missouri city, TX 77459	
Contributor's Principal Occupation consultant		Contributor's Job Title owner
Contributor's employer/law firm voter biz		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 25/28 Rpt: 28/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/07/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) satterfield, mary	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 2025 tuckahoe rd franklinville, NJ 08322		
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/27/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) simmons, willie	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code 423 west 35th st wilmington, DE 19802		
Contributor's Principal Occupation retail		Contributor's Job Title manager
Contributor's employer/law firm Johnny janosik furniture		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) stephens, peyton	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5559 calle santiago cathedral city, CA 92234		
Contributor's Principal Occupation recreation		Contributor's Job Title manager
Contributor's employer/law firm cathedral city country club		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 26/28 Rpt: 29/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 12/08/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) stewart, michael 6 Contributor address; City; State; Zip Code 320 e 24th st houston, TX 77008	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation retired		9 Contributor's Job Title retired
10 Contributor's employer/law firm retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) taylor, jan Contributor address; City; State; Zip Code 1326 magnolia dale dr fresno, TX 77545	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation medical		Contributor's Job Title analyst
Contributor's employer/law firm md anderson		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) telfair, tamesha Contributor address; City; State; Zip Code 457 stratford dr salem, NJ 08079	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation nursing		Contributor's Job Title nurse
Contributor's employer/law firm carneys pt care car		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 27/28 Rpt: 30/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 08/26/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) thomas, scott	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City, State; Zip Code 342 w carriagedale carson, CA 90745		
8 Contributor's Principal Occupation sales		9 Contributor's Job Title salesman
10 Contributor's employer/law firm Gallo wines		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/09/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) turner, carmen	Amount of Contribution (\$) \$100.00
Contributor address; City, State; Zip Code 10223 broadway dr pearland, TX 77584		
Contributor's Principal Occupation government		Contributor's Job Title tax assessor
Contributor's employer/law firm ft bend county		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) turner, frederick	Amount of Contribution (\$) \$250.00
Contributor address; City, State; Zip Code 13601 mooring pointe dr pearland, TX 77584		
Contributor's Principal Occupation accounting		Contributor's Job Title owner
Contributor's employer/law firm self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 28/28 Rpt: 31/53
2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534
4 Date 10/09/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) williams, ann	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code 14511 falling creek dr ste 307 houston, TX 77014	
8 Contributor's Principal Occupation legal		9 Contributor's Job Title attorney
10 Contributor's employer/law firm self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) wiltz, quentin	Amount of Contribution (\$) \$305.00
	Contributor address; City; State; Zip Code 2325 echo harbor dr pearland, TX 77584	
Contributor's Principal Occupation management		Contributor's Job Title project manager
Contributor's employer/law firm stubbs coatings		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 1/22 Rpt: 32/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 07/20/2021		5 Payee name Amegy Bank			
6 Amount (\$) \$34.50		7 Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/29/2021		Payee name Amegy Bank			
Amount (\$) \$2.72		Payee address; City; State; Zip Code P. O. Box 27459 Houston, TX 77227			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/07/2021		Payee name Cyber Cinco Graphic Design			
Amount (\$) \$35.00		Payee address; City; State; Zip Code Katy, TX Katy, TX 77494			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 2/22 Rpt: 33/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 12/10/2021		5 Payee name Cyber Cinco Graphic Design			
6 Amount (\$) \$35.00		7 Payee address; City; State; Zip Code Katy, TX Katy, TX 77494			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description: <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	
Date 12/15/2021		Payee name Cyber Cinco Graphic Design			
Amount (\$) \$25.00		Payee address; City; State; Zip Code Katy, TX Katy, TX 77494			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description: <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	
Date 12/13/2021		Payee name Ft. Bend Democratic Party			
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code 13515 Southwest Freeway Suite 204 Sugar Land, TX 77478			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) 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 filing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate/Officeholder name		Office sought		Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 3/22 Rpt: 34/53	2 FILER NAME Telfair, Oscar M.	3 Filer ID (Ethics Commission Filers) 00084534
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4 Date 12/14/2021	5 Payee name Ft. Bend Democratic Party
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6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 13515 Southwest Freeway Suite 204 Sugar Land, TX 77478
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense joint advertising
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2021	Payee name Innovatives
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Amount (\$) \$1,150.00	Payee address; City; State; Zip Code 10862 Redstone Ct Missouri City, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/26/2021	Payee name Innovatives
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Amount (\$) \$1,425.06	Payee address; City; State; Zip Code 10862 Redstone Ct Missouri City, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 4/22 Rpt: 35/53		2 FILER NAME Telfair, Oscar.M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 09/19/2021		5 Payee name Innovatives			
6 Amount (\$) \$125.06		7 Payee address; City; State; Zip Code 10862 Redstone Ct Missouri City, TX 77459			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/23/2021		Payee name Innovatives			
Amount (\$) \$250.00		Payee address; City; State; Zip Code 10862 Redstone Ct Missouri City, TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/07/2021		Payee name M3Graphics			
Amount (\$) \$466.92		Payee address; City; State; Zip Code 11730 S Wilcrest Dr Houston, TX 77099			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 5/22 Rpt: 36/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 12/06/2021		5 Payee name M3Graphics			
6 Amount (\$) \$129.90		7 Payee address; City; State; Zip Code 11730 S Wilcrest Dr Houston, TX 77099			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/05/2021		Payee name NYCE Graphics & Printing			
Amount (\$) \$225.72		Payee address; City; State; Zip Code 2616 South Loop West Suite 215 Houston, TX 77054			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/15/2021		Payee name PayPal			
Amount (\$) \$133.28		Payee address; City; State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 6/22 Rpt: 37/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 07/25/2021		5 Payee name PayPal			
6 Amount (\$) \$9.40		7 Payee address; City; State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/06/2021		Payee name PayPal			
Amount (\$) \$27.14		Payee address; City; State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/09/2021		Payee name PayPal			
Amount (\$) \$10.47		Payee address; City; State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 7/22 Rpt: 38/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 09/19/2021		5 Payee name PayPal			
6 Amount (\$) \$17.83		7 Payee address; City, State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/31/2021		Payee name PayPal			
Amount (\$) \$166.10		Payee address; City, State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/28/2021		Payee name PayPal			
Amount (\$) \$297.05		Payee address; City, State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 8/22 Rpt: 39/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 08/31/2021		5 Payee name PayPal			
6 Amount (\$) \$17.31		7 Payee address; City; State; Zip Code 12312 Port Grace Boulevard La Vista, NE 68128			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/29/2021		Payee name Sprint2Print			
Amount (\$) \$2,500.00		Payee address; City; State; Zip Code 8748 Clay Rd. Ste. 300 Houston, TX 77080			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/15/2021		Payee name academy Advertising			
Amount (\$) \$80.00		Payee address; City; State; Zip Code 830 majestic st houston, TX 77020			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 9/22 Rpt: 40/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 12/08/2021		5 Payee name amazon			
6 Amount (\$) \$71.56		7 Payee address; City; State; Zip Code 410 terry ave n seattle, WA 98109			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense golf bags	
9 Complete ONLY if direct expenditure to benefit C/OH					
Date 07/29/2021		Candidate/Officeholder name angela hill			
Amount (\$) \$325.00		Payee address; City; State; Zip Code 3118 n park dr missouri city, TX 77659			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone banking	
Complete ONLY if direct expenditure to benefit C/OH					
Date 12/15/2021		Candidate/Officeholder name ascenovation llc			
Amount (\$) \$1,290.48		Payee address; City; State; Zip Code 6565 holister ste 213 houston, TX 77040			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense golf touney consulting	
Complete ONLY if direct expenditure to benefit C/OH					
Candidate/Officeholder name Office sought Office held					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 | Poling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/22 Rpt: 41/53	2 FILER NAME Telfair, Oscar M.	3 Filer ID (Ethics Commission Filers) 00084534
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4 Date 08/24/2021	5 Payee name corner market
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6 Amount (\$) \$3.45	7 Payee address; City; State; Zip Code 2615 sw fwy ste 100 houston, TX 77098
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/17/2021	Payee name costco
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Amount (\$) \$38.94	Payee address; City; State; Zip Code 1146 store sugar land, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hats, scarves
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2021	Payee name custom made enterprises
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Amount (\$) \$154.95	Payee address; City; State; Zip Code 346 ny-59 airmont, NY 10952
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense promotional items
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 11/22 Rpt: 42/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 12/01/2021		5 Payee name cva studios			
6 Amount (\$) \$50.00		7 Payee address; City; State; Zip Code 6915 triola ln houston, TX 77074			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense videos	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 12/08/2021		Candidate/Officeholder name elle turner			
Amount (\$) \$300.00		Office sought Office held			
Date 12/08/2021		Payee name elle turner			
Amount (\$) \$300.00		Payee address; City; State; Zip Code p o box 84272 pearland, TX 77584			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone banking	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/22/2021		Candidate/Officeholder name gkd printing			
Amount (\$) \$60.00		Office sought Office held			
Date 11/22/2021		Payee name gkd printing			
Amount (\$) \$60.00		Payee address; City; State; Zip Code 7100 regency square blvd houston, TX 77036			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 12/22 Rpt: 43/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 10/09/2021		5 Payee name h&h entertainment			
6 Amount (\$) \$1,530.00		7 Payee address; City; State; Zip Code 5060 fm 1960 w houston, TX 77069			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraiser	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/16/2021		Payee name harwin signs			
Amount (\$) \$103.92		Payee address; City; State; Zip Code 9966 harwin dr houston, TX 77036			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/27/2021		Payee name heb			
Amount (\$) \$93.26		Payee address; City; State; Zip Code 4724 hwy 6 missouri city, TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 13/22 Rpt: 44/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 08/10/2021		5 Payee name katy democrats			
6 Amount (\$) \$250.00		7 Payee address; City; State; Zip Code p o box 15707 austin, TX 78761			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) chair dinner		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense misc	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 12/15/2021		Payee name kroger			
Amount (\$) \$340.00		Payee address; City; State; Zip Code 10250 hwy 6 houston, TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 11/05/2021		Payee name malone & associates			
Amount (\$) \$315.00		Payee address; City; State; Zip Code 7100 regency square blvd houston, TX 77036			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 14/22 Rpt: 45/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 07/12/2021		5 Payee name minuteman press			
6 Amount (\$) \$529.62		7 Payee address; City, State; Zip Code 9000 sw fwy ste 100 houston, TX 77074			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/24/2021		Payee name minuteman press			
Amount (\$) \$425.64		Payee address; City, State; Zip Code 9000 sw fwy ste 100 houston, TX 77074			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/25/2021		Payee name minuteman press			
Amount (\$) \$42.93		Payee address; City, State; Zip Code 9000 sw fwy ste 100 houston, TX 77074			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 15/22 Rpt: 46/53	2 FILER NAME Telfair, Oscar M.	3 Filer ID (Ethics Commission Filers) 00084534
4 Date 10/12/2021	5 Payee name minuteman press	
6 Amount (\$) \$81.39	7 Payee address; City; State; Zip Code 9000 sw fwy ste 100 houston, TX 77074	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2021	Payee name minuteman press	
Amount (\$) \$33.45	Payee address; City; State; Zip Code 9000 sw fwy ste 100 houston, TX 77074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/12/2021	Payee name minuteman press	
Amount (\$) \$89.20	Payee address; City; State; Zip Code 9000 sw fwy ste 100 houston, TX 77074	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 16/22 Rpt: 47/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 11/26/2021		5 Payee name minuteman press			
6 Amount (\$) \$133.80		7 Payee address; City; State; Zip Code 9000 sw fwy ste 100 houston, TX 77074			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/16/2021		Payee name minuteman press			
Amount (\$) \$107.61		Payee address; City; State; Zip Code 9000 sw fwy ste 100 houston, TX 77074			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/06/2021		Payee name print4x			
Amount (\$) \$328.92		Payee address; City; State; Zip Code 9966 harwin dr houston, TX 77036			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 17/22 Rpt: 48/53	2 FILER NAME Telfair, Oscar M.	3 Filer ID (Ethics Commission Filers) 00084534
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4 Date 10/12/2021	5 Payee name print4x
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6 Amount (\$) \$216.49	7 Payee address; City; State; Zip Code 9966 harwin dr houston, TX 77036
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/26/2021	Payee name qr code generator
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Amount (\$) \$90.59	Payee address; City; State; Zip Code online online, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense QR codes
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/15/2021	Payee name quail valley golf course
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Amount (\$) \$1,124.37	Payee address; City; State; Zip Code 2880 la quinta dr missouri city, TX 77459
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense golf toumey
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 18/22 Rpt: 49/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 11/24/2021		5 Payee name quail valley golf course			
6 Amount (\$) \$500.00		7 Payee address; City, State; Zip Code 2880 la quinta dr missouri city, TX 77459			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense golf tourney	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/27/2021		Payee name r&l printings			
Amount (\$) \$250.00		Payee address; City, State; Zip Code 10313 market st jacinto city, TX 77029			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/29/2021		Payee name r&l printings			
Amount (\$) \$144.00		Payee address; City, State; Zip Code 10313 market st jacinto city, TX 77029			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 19/22 Rpt: 50/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 12/20/2021		5 Payee name rose bonner			
6 Amount (\$) \$50.00		7 Payee address; City; State; Zip Code 4131 trail lake dr houston, TX 77045			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/24/2021		Payee name sam's club			
Amount (\$) \$82.53		Payee address; City; State; Zip Code 12300 sw fwy stafford, TX 77477			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/17/2021		Payee name sam's club			
Amount (\$) \$99.46		Payee address; City; State; Zip Code 12300 sw fwy stafford, TX 77477			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner contribution	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 20/22 Rpt: 51/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 12/12/2021		5 Payee name sam's club			
6 Amount (\$) \$88.27		7 Payee address; City; State; Zip Code 12300 sw fwy stafford, TX 77477			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/16/2021		Candidate/Officeholder name Payee name stones media			
Amount (\$) \$100.00		Office sought Payee address; City; State; Zip Code stonesmedia.net houston, TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense media	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Date 11/05/2021		Candidate/Officeholder name Payee name texas campaigns consulting			
Amount (\$) \$700.00		Office sought Payee address; City; State; Zip Code 9600 glenfield ct ste 148 houston, TX 77096			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general political consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 21/22 Rpt: 52/53	2 FILER NAME Telfair, Oscar M.	3 Filer ID (Ethics Commission Filers) 00084534
4 Date 09/06/2021	5 Payee name texas victory consulting	
6 Amount (\$) \$400.00	7 Payee address; City; State; Zip Code 1034 sauliner st houston, TX 77019	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general political consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 09/16/2021	Payee name texas victory consulting	
Amount (\$) \$364.00	Payee address; City; State; Zip Code 1034 sauliner st houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general political consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 10/07/2021	Payee name texas victory consulting	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 1034 sauliner st houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general political consulting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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 complete this form.

1 Total pages Schedule F1: Sch: 22/22 Rpt: 53/53		2 FILER NAME Telfair, Oscar M.		3 Filer ID (Ethics Commission Filers) 00084534	
4 Date 12/16/2021		5 Payee name texas victory consulting			
6 Amount (\$) \$450.00		7 Payee address; City; State; Zip Code 1034 sauliner st houston, TX 77019			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general political consulting	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/15/2021		Payee name texas victory consulting			
Amount (\$) \$400.00		Payee address; City; State; Zip Code 1034 sauliner st houston, TX 77019			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense general political consulting	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/01/2021		Payee name vista print			
Amount (\$) \$234.48		Payee address; City; State; Zip Code 275 wyman st waltham, MA 02451			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	