CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST				33
OFFICEHOLDER	MS / MRS / MR	FIRST				33
	Toni			Mi	OFFICE	USE ONLY
		Toni		M	Date Received	
	NICKNAME	LAST Wallace		SUFFIX		JUL 1520
CANDIDATE /	ADDRESS / PO BOX; AP	T / SUITE #: CIT	Y:	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	PO Box 114	, , , , , , , , , , , , , , , , , , , ,			Receipt #	Amount
Change of Address	Richmond, TX 77406				Date Processed	
					Date Imaged	
CAMPAIGN	MS / MRS / MR	FIRST		100	MI	
TREASURER NAME		Ryan			K	
	NICKNAME	LAST			SUFFIX	
		Phillips				
CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO P	O BOX PLEASE);	АР	T / SUITE #; CI	TY; ST	TATE; ZIP CODE
(Residence or Business)						,
CAMPAIGN TREASURER PHONE	AREA CODE PHO	ONE NUMBER E	EXTENSION			
REPORT TYPE	January 15	30th day before	e election	Runoff		ampaign treasurer fficeholder only)
	X July 15	8th day before	election	Exceeded modified reporting limit	Final Report (At	ttach C/OH-FR)
PERIOD COVERED	Month Day Year 01/01/2022		HROUGH	Month Di 06/30/2	ay Year 2022	
ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year 11/08/2022		Primary	Runoff	Other	
		XG	Seneral	Special		
	TOTAL PARTY OF THE	1		12 OFFICE SOUC	GHT (if known) ty Court at Law	
1 OFFICE	OFFICE HELD (if any) Judge, County Court at					

UNSWORN DECLARATION

FORM UD

Attach this men	om declaration to the	terni	of any	OFFICE	USEONLY
campaign finance	report or personal fina ed signature. See Tex.	ncial states	nent in	is - névaved	JUL 15 2022 RCV
1 FILER ID: (Ethics Commission filers)				Method of Deliver	y
2 NAME OF FILER (MEASETYPE OR FR. II).	Toni M. Wallace	enchannelment of an object of the second of the ments. In 2014,000		Date Processed	
3 TYPE OF FILER	CANDIDATE/ OFFICER	OLDER		POLITICAL C	COMMITTEL
	X JUDICIAL CANLIDATE	E/ OFFICEHOL	DER	POLITICAL P	PARTY
	PERSONAL FINANCIA	LSTATEMEN		STATE/COU	NTY CHAIR
	DIRECT CAMPAIGN E	XPENDITURE			
4 TYPE OF REPORT	Campaign Finance Report		and the state of t		
5 DUE DATE	July 15, 2022			পুলালিকেলা ব্যালার কর্মনার কর্মান্তর করেন	gyanggan ana hawanan sakana arawa a arawa a ana ana ana ana ana ana ana ana an
6 UNSWORN DECLARA	ATION:				
My name is Toni Wallac	e	and my date	of buth is 2	/3/1976	
My Address is PO Box	114 F	Richmond	TX	77406	USA
	(street)	(City)	(state)	(zip code)	(country)
	oenalty of perjury that the information required to be reported by me				
Executed in Fort Bend	County, State of Texas	on the 15t	h _{day of} Ju	ly 202	22
		Signature of	ner/ Commil Declara	tree Represent	ative
		Automobilistik kristingsplater til å kristigar kapt sog mot med		into any in a contraction of the	

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 33

3 C / OH NAME	Wallace, Toni	14 File	· ID		
	-				
L5 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures mad These expenditures may have been made without the cand d officeholders are required to report this information only if	lidate's or officeholder's kno	owledge or	
Additional Pages	COMMITTEE TYPE COMMITTEE NAME				
	GENERAL				
	SPECIFIC COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRESS		,	
L6 CONTRIBUTION TOTALS		IIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDG EES OF LOANS, OR CONTRIBUTIONS MADE ELECTRON		0.00	
		PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7.295.77	
EXPENDITURE TOTALS	TOTAL UNITEMIZED POLITICAL EXPENDITURES			0.00	
	4. TOTAL POLIT	TICAL EXPENDITURES	\$	14,038.40	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING P	CAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA ERIOD	Y OF THE \$	0.00	
OUTSTANDING LOAN TOTALS		PAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE RTING PERIOD	\$ s	0.00	
17 AFFIDAVIT					
		I swear, or affirm, under penalty of perj	ury, that the accompanying		
		true and correct and includes all inform under Title 15, Election Code.			
		true and correct and includes all inform			
		true and correct and includes all inform			
		true and correct and includes all inform	ation required to be reporte		
AFFIX NO	OTARY STAMP / SEAL AR	true and correct and includes all informunder Title 15, Election Code. Signature of Candid	ation required to be reporte		
		true and correct and includes all informunder Title 15, Election Code. Signature of Candid	ation required to be reported	ed by me	
Sworn to and sub	scribed before me, by the	true and correct and includes all informunder Title 15, Election Code. Signature of Candid	ation required to be reporte	ed by me	
Sworn to and sub	scribed before me, by the	true and correct and includes all informunder Title 15, Election Code. Signature of Candid	ation required to be reported	ed by me	

FORM JC/OH SUBTOTALS - JC/OH **COVER SHEET PG 3** 18 FILER NAME 19 Filer ID Wallace, Toni 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL) 7.295.77 X \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL) \$ SCHEDULE E(J): LOANS (JUDICIAL) \$ X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 14,038.40 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. \$ SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. \$ 11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$

The Instruct FILER NAME Wallace. Toni	tion Guide explains ho				
		w to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 1/13 Rpt: 4/33	
vvaliace, rom				3 Filer ID	
02/03/2022	Full name of contributor Allen, Pamela Contributor address; City;	out-of-state PAC (ID#:		7 Amount of Contribution (\$)	\$200.0
	P O Box 831 Fulshear, TX 77441				
Caratalla standa Bai			9 Contributor's Job Title		
Realtor	incipal Occupation		9 Contributor's Job Title		
Contributor's en	nployer/law firm		11 Law firm of contributor's sp	pouse (if any)	
If contributor is a	a child, law firm of parent(s) (i	if any)			
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	
02/16/2022	Bedell, Robyn			(,,	\$100.0
-	Contributor address; City;	State; Zip Code		•	
	1777 Bennett Place				
	2777 2011110111 13300				
	Severn, MD 21144				
Contributor's Pr	rincipal Occupation		· Contributor's Job Title		
Contributor's en	nployer/law firm		Law firm of contributor's s	pouse (if any)	
If contributor is	a child, law firm of parent(s) (if any)			
Date	Full name of contributor	out-of-state PAC (ID#:	1	Amount of Contribution (\$)	
02/05/2022	Birks, Velma			(4)	\$100.0
	Contributor address; City; 19826 Firesign Dr.				
	Humble, TX 77346				
Contributor's Pr Retired	rincipal Occupation		Contributor's Job Title		
Contributor's er	mployer/law firm		Law firm of contributor's s	pouse (if any)	
If contributor is	a child, law firm of parent(s) ((if any)	1		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 2/13 Rpt: 5/33 2 FILER NAME 3 Filer ID Wallace, Toni 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 02/04/2022 Brown, Sonya \$100.00 6 Contributor address; City; State; Zip Code 4800 Sugar Grove #140 Stafford, TX 77477 8 Contributor's Principal Occupation 9 Contributor's Job Title 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/01/2022 Cheng & Associates, PLLC \$500.00 Contributor address; City; State; Zip Code 2425 W Loop S #200 Houston, TX 77027 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 01/04/2022 Cheng & Associates, PLLC \$500.00 Contributor address; City; State; Zip Code 2425 W Loop S #200 Houston, TX 77027 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 3/13 Rpt: 6/33 2 FILER NAME 3 Filer ID Wallace, Toni 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) Ourt-of-state PAC (ID#: 02/03/2022 Cole, Nichole \$100.00 6 Contributor address; City; State; Zip Code 1310 Westshore Drive Houston, TX 77094 8 Contributor's Principal Occupation 9 Contributor's Job Title Physician 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Out-of-state PAC (ID# Amount of Contribution (\$) 01/04/2022 Curimbaba, Sally \$50.00 Contributor address; City; State; Zip Code 6103 Cross Creek Harbor Ln Fulshear, TX 77441 Contributor's Principal Occupation Contributor's Job Title Small Business Owner Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) out-of-state PAC (ID# Date Full name of contributor Amount of Contribution (\$) 02/03/2022 \$200.00 Dry, Tracey Contributor address; City; State; Zip Code 1912 Glenwick Dr. Plano, TX 75075 Contributor's Principal Occupation Contributor's Job Title General Counsel Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Zimperium If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 4/13 Rpt: 7/33 2 FILER NAME 3 Filer ID Wallace. Toni 4 Date 5 Full name of contributor Out-of-state PAC (ID#: 7 Amount of Contribution (\$) 02/06/2022 \$100.00 Global Business Cards 6 Contributor address; City; State; Zip Code 6307 Penhallow Ln Missouri City, TX 77459 8 Contributor's Principal Occupation 9 Contributor's Job Title 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Out-of-state PAC (ID#: Amount of Contribution (\$) Haleem, Shah 02/20/2022 \$250.00 Contributor address; City; State; Zip Code 5815 Silkbay Meadow Dr Katy. TX 77494 Contributor's Principal Occupation Contributor's Job Title Realtor Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/01/2022 Hamilton, Shafalinia \$50.00 Contributor address; City; State; Zip Code 3226 Dandelion Dr Richmond, TX 77469 Contributor's Principal Occupation Contributor's Job Title HR Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 5/13 Rpt: 8/33 3 Filer ID 2 FILER NAME Wallace, Toni 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#: 01/04/2022 Hamilton, Shafalinia \$50.00 6 Contributor address; City; State; Zip Code 3226 Dandelion Dr Richmond, TX 77469 8 Contributor's Principal Occupation 9 Contributor's Job Title 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Out-of-state PAC (ID# Amount of Contribution (\$) 01/12/2022 Hamilton, Shafalinia \$50.00 Contributor address; City; State; Zip Code 3226 Dandelion Dr Richmond, TX 77469 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Out-of-state PAC (ID#: Full name of contributor Amount of Contribution (\$) 01/19/2022 Hamilton, Shafalinia \$50.00 Contributor address; City; State; Zip Code 3226 Dandelion Dr Richmond, TX 77469 Contributor's Principal Occupation Contributor's Job Title Law firm of contributor's spouse (if any) Contributor's employer/law firm If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 6/13 Rpt: 9/33 3 Filer ID 2 FILER NAME Wallace, Toni 4 Date 5 Full name of contributor out-of-state PAC (IDI: 7 Amount of Contribution (\$) \$50.00 02/10/2022 Hamilton, Shafalinia 6 Contributor address; City; State; Zip Code TX 8 Contributor's Principal Occupation 9 Contributor's Job Title 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) \$25.00 02/03/2022 Hampton, Michelle Contributor address; City; State; Zip Code 102 McTighe Drive Bellaire, TX 77401 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/04/2022 \$100.00 Harris, Ariel Contributor address; City; State; Zip Code 179701 Ken Dr. Richmond, TX 77406 Contributor's Principal Occupation Contributor's Job Title Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Law Office of Ariel M. Harris If contributor is a child, law firm of parent(s) (if any)

O6/29/2022 Ha 6 Co 17 Rin Contributor's Principa Attorney Contributor's employe If contributor is a child Date Fu 02/03/2022 Ha Co		9 Contributor's Job Title 11 Law firm of contributor's s	Sch: 7/13 Rpt: 10/33 3 Filer ID 7 Amount of Contribution (\$) Spouse (if any) Amount of Contribution (\$)
Wallace, Toni Date 06/29/2022 Ha 6 Co 17 Ric Contributor's Principa Attorney Contributor's employed If contributor is a child Date 02/03/2022 Ha Co	ntributor address; City; State; Zip Code 9701 Ken Dr. chmond, TX 77406 Il Occupation d, law firm of parent(s) (if any) Il name of contributor	9 Contributor's Job Title 11 Law firm of contributor's s	7 Amount of Contribution (\$) Spouse (if any) Amount of Contribution (\$)
Date 06/29/2022 Ha 6 Co 17 Ric Contributor's Principa Attorney Contributor's employe If contributor is a child Date 02/03/2022 Ha Co	ntributor address; City; State; Zip Code 9701 Ken Dr. chmond, TX 77406 Il Occupation d, law firm of parent(s) (if any) Il name of contributor	9 Contributor's Job Title 11 Law firm of contributor's s	Spouse (if any) Amount of Contribution (\$)
Contributor's Principa Attorney Contributor's employe If contributor is a child Date Fu 02/03/2022 Ha	ntributor address; City; State; Zip Code 9701 Ken Dr. chmond, TX 77406 Il Occupation d, law firm of parent(s) (if any) Il name of contributor	9 Contributor's Job Title 11 Law firm of contributor's s	Spouse (if any) Amount of Contribution (\$)
Contributor's Principal Attorney Contributor's employed If contributor is a child Date	ntributor address; City; State; Zip Code 9701 Ken Dr. chmond, TX 77406 Il Occupation d, law firm d, law firm of parent(s) (if any) Il name of contributor	9 Contributor's Job Title 11 Law firm of contributor's s	Amount of Contribution (\$)
Ric Contributor's Principa Attorney Contributor's employe If contributor is a child Date Fu 02/03/2022 Ha	chmond, TX 77406 Il Occupation cr/law firm d, law firm of parent(s) (if any) Il name of contributor	11 Law firm of contributor's s	Amount of Contribution (\$)
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Contributor's Principal Attorney Contributor's employed If contributor is a child Date Pulper	or/law firm I, law firm of parent(s) (if any) Il name of contributor	11 Law firm of contributor's s	Amount of Contribution (\$)
Attorney Contributor's employed of contributor is a child of	er/law firm d, law firm of parent(s) (if any) Il name of contributor	11 Law firm of contributor's s	Amount of Contribution (\$)
Contributor's employed ff contributor is a child pate Fu O2/03/2022 Ha	I, law firm of parent(s) (if any) Il name of contributor out-of-state PAC (ID arris, Jasmine ontributor address; City; State; Zip Code	f:)	Amount of Contribution (\$)
Date Fu Ha	I, law firm of parent(s) (if any) Il name of contributor out-of-state PAC (ID arris, Jasmine ontributor address; City; State; Zip Code	f:)	Amount of Contribution (\$)
Date Fu 02/03/2022 Ha	Il name of contributor		
Date Fu 02/03/2022 Ha	Il name of contributor		
02/03/2022 Ha	urris, Jasmine ntributor address; City; State; Zip Code		
02/03/2022 Ha	urris, Jasmine ntributor address; City; State; Zip Code		
Co	ntributor address; City; State; Zip Code		
	555 VV. Tojas Trail		
l Sa	n Antonio, TX 78257		
Contributor's Principa		Contributor's Job Title	
•		Principal	
Contributor's employ	er/law firm	Law firm of contributor's s	spouse (if any)
			was a superior of the superior
If contributor is a chil	d, law firm of parent(s) (if any)		
Date Fu	Il name of contributor	#· \	Amount of Contribution (\$)
	erring, Malika	·	\$1
	entributor address; City; State; Zip Code		
	25 Silhouette Bay Drive		
			11.5
Pe	earland, TX 77584		
Contributor's Principa		Contributor's Job Title	
Attorney		Senior Counsel	
Contributor's employ	er/law firm	Law firm of contributor's s	spouse (if any)
BP			
If contributor is a chil	d, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 8/13 Rpt: 11/33 3 Filer ID 2 FILER NAME Wallace, Toni 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#: \$75.00 02/16/2022 Hill, Robyn 6 Contributor address; City; State; Zip Code 14322 Kingston Falls Humble, TX 77396 9 Contributor's Job Title 8 Contributor's Principal Occupation 11 Law firm of contributor's spouse (if any) 10 Contributor's employer/law firm 12 If contributor is a child, law firm of parent(s) (if any) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date \$200.00 01/04/2022 McDonald, Marie Contributor address; City; State; Zip Code TX Contributor's Job Title Contributor's Principal Occupation Consultant Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/02/2022 McElroy, Summer \$200.00 Contributor address; City; State; Zip Code 2950 North Loop West Suite 500 Houston, TX 77092 Contributor's Principal Occupation Contributor's Job Title Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) Law Offices of Summer A. McElroy If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 9/13 Rpt: 12/33 2 FILER NAME 3 Filer ID Wallace, Toni 5 Full name of contributor 4 Date Out-of-state PAC (ID#:_ 7 Amount of Contribution (\$) 02/03/2022 Metoyer, Tyra \$100.00 6 Contributor address; City; State; Zip Code 3607 Bainbridge Estates Dr Spring, TX 77388 8 Contributor's Principal Occupation 9 Contributor's Job Title **Public Relations** 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) 12 If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 01/25/2022 Murray, Nireasha \$750.00 Contributor address; City; State; Zip Code 11805 Chimney Rock Road Houston, TX 77035 Contributor's Principal Occupation Contributor's Job Title Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) The N. Murray Law Firm If contributor is a child, law firm of parent(s) (if any) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 02/05/2022 Oliver, Anithia \$250.00 Contributor address; City; State; Zip Code 124 W. Carruth Lane Lewisville, TX 75077 Contributor's Principal Occupation Contributor's Job Title Self Employed Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any)

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 10/13 Rpt: 13/33 2 FILER NAME 3 Filer ID Wallace. Toni 5 Full name of contributor 7 Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 02/17/2022 Payne, Brendettae \$100.00 6 Contributor address; City; State; Zip Code 14090 Sw Freeway Suite 300 Sugar Land, TX 77478 Sugar Land, TX 77478 8 Contributor's Principal Occupation 9 Contributor's Job Title Attorney 11 Law firm of contributor's spouse (if any) 10 Contributor's employer/law firm Law Offices of Brendettae J. Payne 12 If contributor is a child, law firm of parent(s) (if any) Full name of contributor Amount of Contribution (\$) Date Out-of-state PAC (ID#: \$75.00 02/03/2022 Quarles, Daphne Contributor address; City; State; Zip Code 6111 Four River Dr Richmond, TX 77469 Contributor's Principal Occupation Contributor's Job Title Accountant Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Full name of contributor Amount of Contribution (\$) Date Out-of-state PAC (ID#: 02/03/2022 \$101.00 Ramakrishnan, Lakshmi Contributor address; City; State; Zip Code 619 Arden Oaks Sugar Land, TX 77479 Contributor's Principal Occupation Contributor's Job Title Attorney Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any)

	ARY POLITICAL CONTRIBUTI		SCHEDULE A(J)1
The Instruct	tion Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 11/13 Rpt: 14/33
FILER NAME		•	3 Filer ID
Wallace, Toni			
Date !	5 Full name of contributor	#:)	7 Amount of Contribution (\$)
01/04/2022	Reid, Rayna		\$1,741.4
	Contributor address; City; State; Zip Code		
	•		
	TX		
	incipal Occupation	9 Contributor's Job Title Director	
Public Relatio			Table (fam.)
Contributor's er	nployer/law irm	11 Law firm of contributor's s	pouse (ii any)
If an atributania	a shild law form of payant(a) (if any)		
if contributor is	a child, law firm of parent(s) (if any)		
Date 02/03/2022	Full name of contributor out-of-state PAC (ID Rencher, Robert	tf:)	Amount of Contribution (\$) \$25.
02/03/2022			
	Contributor address; City; State; Zip Code		
	TX		
Contributor's P	rincipal Occupation	Contributor's Job Title	
		1 E of contributed	(if any)
Contributor's er	mployer/law firm	Law firm of contributor's s	spouse (ii arry)
If contributor is	a child, law firm of parent(s) (if any)		
ii contributor is	a crima, law initi or parcria(o) (ii arry)		
Date	Full name of contributor Out-of-state PAC (ID	141.	Amount of Contribution (\$)
02/03/2022	Sanders, Angela	"	\$25.
OL/OO/LOLL	Contributor address; City; State; Zip Code		
	Contribution address, City, State, 21p code		
1 .	TX		
Contributorio	rincipal Occupation	Contributor's Job Title	
Contributors P	ппсіраї Оссираціон	Contributor 5 300 Title	
Contributor's e	mployer/law firm	Law firm of contributor's s	snouse (if any)
Continuators e	mployemaw iimi	Law min or condicator 5 c	pouse (ii aiiy)
If contributor is	a child, law firm of parent(s) (if any)		
" condition is	a como, an min or parongo) (ii any)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 1 Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 12/13 Rpt: 15/33 3 Filer ID 2 FILER NAME Wallace, Toni 4 Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (IDII: 02/03/2022 \$25.00 Sawyer, Connie 6 Contributor address; City; State; Zip Code 11604 Baystone Place Concord. NC 28025 9 Contributor's Job Title 8 Contributor's Principal Occupation Attorney 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) **EQRx** 12 If contributor is a child, law firm of parent(s) (if any) Full name of contributor out-of-state PAC (ID# Amount of Contribution (\$) Date 02/19/2022 \$500.00 The Guess Firm, P.L.L.C. Contributor address; City; State; Zip Code 3100 Timmons Lane Ste 200 Houston, TX 77027 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/03/2022 The Singleton Law Firm \$100.00 Contributor address; City; State; Zip Code 3303 Main St Ste 305 Houston, TX 77002 Contributor's Principal Occupation Contributor's Job Title Contributor's employer/law firm Law firm of contributor's spouse (if any) If contributor is a child, law firm of parent(s) (if any)

MONETA	ARY POLITICAL	CONTRIBUT	IONS	SCHEDULE A	(J)1
The Instruc	tion Guide explains ho	w to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 13/13 Rpt: 16/33	
FILER NAME				3 Filer ID	
Wallace, Toni					
	5 Full name of contributor	out-of-state PAC (IE)#·)	7 Amount of Contribution (\$)	
02/03/2022	Thomas, Bobby				\$250.0
		State: 7in Code			
	2846 Pepperwood Dr	State, 21p Code			
1	Sugar Land, TX 77479				
Contributor's P	rincipal Occupation		9 Contributor's Job Title		
Contributor's er	mployer/law firm		11 Law firm of contributor's s	pouse (if any)	
If contributor is	a child, law firm of parent(s) (if	any)			
Date	Full name of contributor	out-of-state PAC (II	D#:)	Amount of Contribution (\$)	
02/18/2022	Walker, Diana	_			\$75.0
	Contributor address; City;	State: Zip Code			
	14506 Glade Point Drive				
	21000 0111110 1 01111 2111				
	Cypress, TX 77429				
Contributor's P	rincipal Occupation		Contributor's Job Title		
Contributor's e	mployer/law firm		Law firm of contributor's s	spouse (if any)	
If contributor is	a child, law firm of parent(s) (i	f any)			
		-			-

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 1/17 Rpt: 17/33	Wallace, Toni
Date	5 Payee name
05/16/2022	AADA
Amount (\$) \$150.00	7 Payee address; City; State; Zip Code
	TX
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin. TX, officeholder living expense AADA Brunch
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH
Date	
	Payee name
03/05/2022	Payee name ActBlue
	ActBlue Payee address; City; State; Zip Code
03/05/2022 Amount (\$)	ActBlue Payee address; City; State; Zip Code
03/05/2022 Amount (\$)	ActBlue Payee address; City, State; Zip Code
03/05/2022 Amount (\$) \$350.00 PURPOSE OF	ActBlue Payee address; City; State; Zip Code TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sought Office held
O3/05/2022 Amount (\$) \$350.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/C	ActBlue Payee address; City; State; Zip Code TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Office held
O3/05/2022 Amount (\$) \$350.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	ActBlue Payee address; City; State; Zip Code TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Office sought Office held
O3/05/2022 Amount (\$) \$350.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	ActBlue Payee address; City; State; Zip Code TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name ActBlue Payee address; City; State; Zip Code
O3/05/2022 Amount (\$) \$350.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/26/2022 Amount (\$)	ActBlue Payee address; City; State; Zip Code TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name ActBlue Payee address; City; State; Zip Code
O3/05/2022 Amount (\$) \$350.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/26/2022 Amount (\$)	ActBlue Payee address; City; State; Zip Code TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder name Candidate/Officeholder name Office sought Office held Payee name ActBlue Payee address; City; State; Zip Code

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Politica Credit Card Payment	
L Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 2/17 Rpt: 18/33	Wallace, Toni
Date	5 Payee name
03/11/2022	Amazon
\$ Amount (\$) \$72.11	7 Payee address; City; State; Zip Code TX
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Plastic Bottles
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/16/2022	Amazon
Amount (\$) \$154.96	Payee address; City; State; Zip Code TX
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, T.X., officeholder living expense Plastic Bottles
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
06/27/2022	Amazon
Amount (\$) \$106.20	Payee address; City; State; Zip Code
	TX
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Plastic Bags
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

			EVENINE CATEO	ODIES FOR S	OV 9(a)		
Advertising Expens Accounting/Banking Consulting Expense Contributions/ Dona Candidate/Office Credit Card Payme	e ations Made By - eholder/Political C	Committee L	expenditure category vent Expense ees ood/Beverage Expense sitti/Awards/Memorials Expense egal Services	Loan Repaym Office Overhe Polling Expen Printing Expen Salaries/Wage	ent/Reimbursement ad/Rental Expense se nse es/Contract Labor	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related Expense
T-1-1			The Instruction Guide explain	ns now to comp	nete this form.	3 Filer ID	
. Total pages Sch	1					3 FIRET ID	
Sch: 3/17 Rpt		Wallace, Tor	11				
Date 01/17/2022		Payee name	aribbean Chamber of Co	mmorco			
01/17/2022						-	
6 Amount (\$)	\$200.00	7 Payee addres	s; City; Sta	ate; Zip Code			
PURPOSE OF EXPENDITUR		Contribution	e Categories listed at the top of this s/Donations Made By ffficeholder/Political Con		Check if Austi	outside of Texas. Complete S in, TX, officeholder living exper to ACCC Ruby Girls	nse
9 Complete ONL expenditure to		Candidate/Office	ceholder name	Office sough	nt	Office held	
Date		Payee name					
01/10/2022	1	At Home Sto	ore				
Amount (\$)	\$28.12	Payee addres	ss; City; Sta	ate; Zip Code			
PURPOSE OF EXPENDITUR		(a) Category (Se Advertising	e Categories listed at the top of this Expense	s schedule) (I	Check if Aust	el outside of Texas. Complete bin, T.X., officeholder living expe Office Necessity	
Complete ONL expenditure to		Candidate/Offi	ceholder name	Office sough	nt	Office held	
Date		Payee name					
03/29/2022		Bearden, S	ısan				
Amount (\$)	\$100.00	Payee addre	ss; City; St	ate; Zip Cod	e		
		TX					
PURPOSE OF EXPENDITUI		Contribution	ee Categories listed at the top of this ns/Donations Made By Officeholder/Political Co		Check if Aus	el outside of Texas. Complete tin, TX, officeholder living exp Fort Bend County J vices Department fo	ense uvenile Probation
Complete ONL expenditure to			ceholder name	Office soug	ht	Office held	
		•					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

FILER NAME Wallace, Toni Payee name Buc-ee's Payee address; City; State;	3 Filer ID Zip Code
Wallace, Toni Payee name Buc-ee's	
Payee name Buc-ee's	Zip Code
Buc-ee's	Zip Code
	Zip Code
Payee address; City; State;	Zip Code
	•
Katy, TX	
Category (See Categories listed at the top of this sched	
Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Food and Food Items for Volunteers
Candidata/Officeholder name	ffice sought Office held
Candidate/Officerolder flame	office sought Office netu
Payee name	
Buc-ee's	
Payee address; City; State;	Zip Code
Katy. TX	
	(h) Description
	dule) (b) Description Check if travel outside of Texas. Complete Schedule T.
Travei in District	Check if Austin, TX, officeholder living expense
	Blockwalking
Candidate/Officeholder name O	ffice sought Office held
Payee address; City; State;	Zip Code
4542 Ripple Ridge Dr	
Houston, TX 77053	
Catagory	(h) Description
	dule) (b) Description Check if travel outside of Texas. Complete Schedule T.
Advertising Expense	Check if Austin, TX, officeholder living expense
	Social Media Advertisement
Candidate/Officeholder name O	ffice sought Office held
·	3
	Candidate/Officeholder name Payee name Buc-ee's Payee address; City; State; Katy, TX Category (see Categories listed at the top of this sche Travel In District Candidate/Officeholder name O Payee name ButlerWiseman LLC Payee address; City; State; 4542 Ripple Ridge Dr Houston, TX 77053 Category (see Categories listed at the top of this sche Advertising Expense

POLITICAL EXPENDITURES FROM POLITICAL

			EXPENDITURE CA	TEGORIES FOR	R BO	X 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee	Event Expense Fees Food/Beverage Expense Git/Awards/Memonials Expen Legal Services The Instruction Guide e	Loan Rep Office Ove Polling Ex Printing E Salaries/V	aymen erhead pense opense /ages/	t/Reimbursement //Rental Expense e //Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Total pages Schedule F1:	2 FILER NAM	E				3 1	Filer ID
	Sch: 5/17 Rpt: 21/33	Wallace, T	oni					
	Date 03/12/2022	5 Payee nam CLW Forty	Plus Models, Inc.					
	Amount (\$) . \$100.00	7 Payee addr	ess; City;	State; Zip Co	ode			
	PURPOSE OF EXPENDITURE	Contributi	See Categories listed at the top ons/Donations Made I /Officeholder/Political	Ву	(b)	Check if Austin	n, TX, 0	e of Texas. Complete Schedule T. officeholder living expense 28th Annual Fashion Show Ticke
	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sou	ight			Office held
_	Date	Payee nam	e					
	03/12/2022	CLW Fort	Plus Models. Inc.					
	Amount (\$) \$100.00	Payee add	ess; City;	State; Zip Co	ode			
_	PURPOSE	(0) 0-1			(h)	Description		
	OF EXPENDITURE		(See Categories listed at the top	of this schedule)	(0)	Check if Austin	n. TX.	te of Texas. Complete Schedule T. officeholder living expense venir Book Ad
	OF	Advertisin		Office so		Check if Austin	n. TX.	officeholder living expense
	OF EXPENDITURE Complete ONLY if direct	Candidate/O	g Expense fficeholder name			Check if Austin	n. TX.	officeholder living expense venir Book Ad
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Candidate/OH Payee nan Carey's F Payee add	fficeholder name re rozen Delights ress; City;		ıght	Check if Austin	n. TX.	officeholder living expense venir Book Ad
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/31/2022 Amount (\$) \$90.00	Candidate/OH Payee nan Carey's F Payee add	fficeholder name ferozen Delights ress; City;	Office so	ıght	Check if Austin	n. TX.	officeholder living expense venir Book Ad
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 05/31/2022 Amount (\$)	Candidate/OH Payee nam Carey's F Payee add Missouri ((a) Category	fficeholder name re rozen Delights ress; City;	Office so	ught	Description Check if vavei	n, Tx. Sour	officeholder living expense venir Book Ad

CONTRIBUTION	NS					SCHEDUL	- LT
	EXF	PENDITURE CAT	EGORIES FO	R BC	X 8(a)		- wi
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	7 - Gift/Awar Il Committee Legal Se	verage Expense rds/Memorials Expense	Office Ov Polling Ex Printing E Salaries	erhead kpense xpens Wages	e /Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related E Travel in District Travel Out of District OTHER (enter a category not listed ab	
1 Total pages Schedule F1:	2 FILER NAME					3 Filer ID	
Sch: 6/17 Rpt: 22/33	Wallace, Toni						
4 Date 01/21/2022	5 Payee name Code BLK						
6 Amount (\$) \$948.00	7 Payee address;	City;	State; Zip Co	ode			
8 PURPOSE OF EXPENDITURE	(a) Category (See Catego Advertising Expen		this schedule)	(b)	Check if Austin,	utside of Texas. Complete Schedule T. TX, officeholder living expense Campaign Management	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholde H	er name	Office sou	ught		Office held	
Date	Payee name						
03/01/2022	Code BLK						
Amount (\$) \$700.00	Payee address; Houston, TX	City;	State; Zip Co	ode			
PURPOSE OF EXPENDITURE	(a) Category (See Category Advertising Expen		this schedule)	(b)	Check if Austin.	uutside of Texas. Complete Schedule T. TX, officeholder living expense Campaign Management	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholde	er name	Office sou	ught	we get the Control of	Office held	
Date	Payee name					\(\frac{1}{2}\)	
04/04/2022	Code BLK						
Amount (\$) \$700.00	Payee address;	City;	State; Zip Co	ode			
	Houston, TX						
PURPOSE OF EXPENDITURE	(a) Category (See Category Advertising Experi		this schedule)	(b)	Check if Austin.	outside of Texas. Complete Schedule T. TX, officeholder living expense Campaign Management	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholde H	er name	Office so	ught		Office held	

SCHEDULE F1

Advertising Expense	
Accounting/Banking	
Consulting Expense	
Contributions/ Donations Made By -	
Candidate/Officeholder/Political Committee	
Credit Card Payment	

EXPENDITURE CATEGORIES FOR BOX 8(a) Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Candidate/Officeholder/Political Credit Card Payment		Nages/Contract Labor OTHER (enter a category not listed above)
Total and a Calculate Etc.	•	, , , , , , , , , , , , , , , , , , ,
Total pages Schedule F1:		3 Filer ID
Sch: 7/17 Rpt: 23/33	Wallace, Toni	
Date	5 Payee name	
05/12/2022	Code BLK	
Amount (\$)	7 Payee address; City; State; Zip Co	ode
	Payee address, City, State, Zip Ct	oue
\$700.00		
	TX	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	The state of the s	Check if Austin, TX, officeholder living expense
	·	Social Media Campaign Management
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	Н	
Date	Payee name	
06/06/2022	Code BLK	
Amount (\$)	Payee address; City; State; Zip C	code
\$700.00	rayee address, stoy, state, ap s	
\$100.00		
	TX	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Advertising Expense	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE		Check if Austin, TX, officeholder living expense
		Social Media Campaign Management
Complete ONLY if direct	Candidate/Officeholder name Office so	ought Office held
expenditure to benefit C/C	Н	
D-1-	T	
Date	Payee name	
05/31/2022	Dick's Sporting Goods	
Amount (\$)	Payee address; City; State; Zip C	Code
\$246.00		
	•	
	TV	
	TX	4
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Giveaways for Three-On-Three Tournament
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office so	ought Office held
experionale to belieff C/C	AT.	

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Food/Beverage Expense Foling Expense Primting Expense Legal Services Salaries/Wages/Contract Labor			Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
Credit Card Payment		The Instruction Guide expl					
Total pages Schedule F1:	2 FILER NAM	E			3 Filer ID		
Sch: 8/17 Rpt: 24/33	Wallace, 1	oni					
Date	5 Payee nam	e					
05/31/2022	Fiesta Ma						
Amount (\$)	7 Payee addi	ess; City; S	State; Zip Code				
\$164.85			State, 2.p 0000				
	Missouri C	City, TX					
B PURPOSE OF EXPENDITURE	(a) Category Event Exp	See Categories listed at the top of ti	his schedule) (b)	Check if Austin	outside of Texas. Complete Schedule T. . TX. officeholder living expense r Three-On-Three Tournament		
Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sought		Office held		
Date	Payee nam	e					
02/03/2022	1	History Association					
Amount (\$)	Payee add	ess; City;	State; Zip Code				
\$200.00 PURPOSE	-	, TX 77469 (See Categories listed at the top of t	his schedule) (b)	Description			
OF EXPENDITURE		g Expense		Check if Austin	outside of Texas. Complete Schedule T. n. TX, officeholder living expense ch Rodeo's Arena Banner Sponsor		
Complete <u>ONLY</u> if direct expenditure to benefit C/O		fficeholder name	Office sought		Office held		
Date	Payee nam	e			· · · · · · · · · · · · · · · · · · ·		
01/10/2022	HEB Groo	ery Store					
Amount (\$) \$53.18	Payee add	ess; City;	State; Zip Code				
	TX						
PURPOSE OF EXPENDITURE		(See Categories listed at the top of t erage Expense	this schedule) (b)	Check if Austin	outside of Texas. Complete Schedule T. n.TX. officeholder living expense npaign Volunteers		
Complete ONLY if direct expenditure to benefit C/C		fficeholder name	Office sought		Office held		

SCHEDULE F1

Advertising Expense	
Accounting/Banking	
Consulting Expense	
Contributions/ Donations Made By -	
Candidate/Officeholder/Political Co	mmittee
Credit Card Payment	

EXPENDITURE CATEGORIES FOR BOX 8(a) 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
OTHER (enter a category not listed above)

		The instruction Guide explains now to co	mpie	siete this form.
	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 9/17 Rpt: 25/33	Wallace, Toni		
	Date	5 Payee name		
	02/14/2022	Hobby Lobby		
	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$59.40			
		TX		·
3	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	p) Description
	OF	Advertising Expense	, ,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	3 - 17		Check if Austin, TX, officeholder living expense
				Basket Items for Fort Bend County Fair Go Tejano
				Committee Fundraiser
)	Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	nt Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	02/20/2022	Houston Lawyers Association, Inc.		
_	Amount (\$)	Payee address; City; State; Zip Co	ode	9
	\$80.00	http://houstonlawyersassociation.org		
				•
		TX		
_	PURPOSE		(b)	b) Description
	OF	(a) Category (See Categories listed at the top of this schedule) Membership Fee	(0)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Wellbership Fee		Check if Austin, TX, officeholder living expense
				Professional Association Membership
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ught	ht Office held
	expenditure to benefit C/O	H		
_	Date	Payee name		
	02/26/2022	Innovative Solutions IT		
	Amount (\$)	Payee address; City; State; Zip C	ode	e
	\$162.38	10862 REDSTONE CT MISSOURI CITY, TX		
		Missouri City, TX 77459		
_	BUDDOCE		1/5	h) 0
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(6)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Printing Expense		Check if Austin, TX, officeholder living expense
				Banner
_	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	ht Office held .
	expenditure to benefit C/C	Н		
_				

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 10/17 Rpt: 26/33	Wallace, Toni
Date	5 Payee name
01/06/2022	Innovative Solutions IT
Amount (\$)	7 Payee address; City; State; Zip Code
\$3,823.02	10862 REDSTONE CT MISSOURI CITY, TX 77459 Missouri City, TX 77459
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin. TX, officeholder living expense Design and Printing for Cards, Signs, Banner + Delivery Fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
05/23/2022	Lunington Labs
Amount (\$) \$28.14	Payee address; City; State; Zip Code TX
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin. TX, officeholder living expense Soy Candle
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
06/12/2022	Meta Platforms, Inc.
Amount (\$) \$9.99	Payee address; City; State; Zip Code
	TX
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if wavel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Facebook Ad
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH
	•

EXPENDITURE CATEGORIES FOR BOX \$(a) Categories Committee		EVACUATION CATECORIES FOR BOY 9/4)
Sch: 11/17 Rpl: 27/33 Wallace, Toni	Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political	Levent Expense Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense la Committee Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Polling Expense Printing Expense Printing Expense Printing Expense Printing Expense Fravel in District Travel out of District OTHER (enter a category not listed above)
Date 05/25/2022 Amount (\$) \$205.00 TX PURPOSE CANDITURE Candidate/Officeholder name Office sought Office held Payee address; City: State; Zip Code TX (a) Category: (see Categories isted at the top of the schedule) Conscient Austra, T.t. officerolorer king expense Missouri City Juneteenth Gala Complete ONLY if direct of Payee name Missouri City Juneteenth Committee Amount (\$) \$307.50 Payee address; City: State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category: (see Categories isted at the top of this schedule) Contributions/Donations Made By Contributions/Opnations Made By Contributions/Opnations Made By Candidate/Officeholder/Political Committee Complete ONLY. If direct oxpenditure to benefit C/OH Date Payee and Candidate/Officeholder name Office sought Office held Complete ONLY. If direct oxpenditure to benefit C/OH Payee address; City: State; Zip Code TX PURPOSE OF EXPENDITURE Candidate/Officeholder/Political Committee Payee name Office sought Office held TX Purpose Office Sought Office held Complete ONLY. If direct oxpenditure to benefit C/OH Candidate/Officeholder/Political Committee Payee name Office sought Office held TX Purpose Office held Complete ONLY. If direct oxpenditure to denote the political Committee Office sought Office held Complete ONLY. If direct oxpenditure to denote the political Committee Office held Complete ONLY. If direct oxpenditure to denote the political Committee Office sought Office held Complete ONLY. If direct Oxford the political Committee Office sought Office held Complete Oxford Australa, Tx. officerolater for sus. Complete Schedule T. Oxford the political Committee Oxford Oxford Name oxford Texas. Complete Schedule T. Oxford Oxford Name oxford Texas. Complete Schedule T. Oxford Oxford Name oxford Oxford Name oxford Oxford Name oxfo	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Date 05/25/2022 Amount (\$) \$205.00 TX PURPOSE CANDITURE Candidate/Officeholder name Office sought Office held Payee address; City: State; Zip Code TX (a) Category: (see Categories isted at the top of the schedule) Conscient Austra, T.t. officerolorer king expense Missouri City Juneteenth Gala Complete ONLY if direct of Payee name Missouri City Juneteenth Committee Amount (\$) \$307.50 Payee address; City: State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category: (see Categories isted at the top of this schedule) Contributions/Donations Made By Contributions/Opnations Made By Contributions/Opnations Made By Candidate/Officeholder/Political Committee Complete ONLY. If direct oxpenditure to benefit C/OH Date Payee and Candidate/Officeholder name Office sought Office held Complete ONLY. If direct oxpenditure to benefit C/OH Payee address; City: State; Zip Code TX PURPOSE OF EXPENDITURE Candidate/Officeholder/Political Committee Payee name Office sought Office held TX Purpose Office Sought Office held Complete ONLY. If direct oxpenditure to benefit C/OH Candidate/Officeholder/Political Committee Payee name Office sought Office held TX Purpose Office held Complete ONLY. If direct oxpenditure to denote the political Committee Office sought Office held Complete ONLY. If direct oxpenditure to denote the political Committee Office held Complete ONLY. If direct oxpenditure to denote the political Committee Office sought Office held Complete ONLY. If direct Oxford the political Committee Office sought Office held Complete Oxford Australa, Tx. officerolater for sus. Complete Schedule T. Oxford the political Committee Oxford Oxford Name oxford Texas. Complete Schedule T. Oxford Oxford Name oxford Texas. Complete Schedule T. Oxford Oxford Name oxford Oxford Name oxford Oxford Name oxfo		
Missouri City Juneteenth Committee		5. Payae name
Amount (\$) \$205.00 TX PURPOSE OF EXPENDITURE Contributions/Donations Made By Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Payee address; City; State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category (See Categories isseed at the top of the schedule) Committee Office held Complete ONLY if direct expenditure to benefit C/OH TX PURPOSE OF EXPENDITURE (a) Category (See Categories isseed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee TX PURPOSE OF EXPENDITURE (a) Category (See Categories isseed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder name Office sought Office held Office held Office held Date Organical Ausen, Tx, officeholder sking expense Missouri City Juneteenth Gala Date O3/26/2022 Payee name NAACP - Missouri City TX PURPOSE OF EXPENDITURE (a) Category (See Categories isseed at the top of this schedule) Committee Office sought Office held Office held Office held Office held Office held Office held Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
PURPOSE OF EXPENDITURE (a) Category (See Categories losted at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct expenditure to benefit C/OH Date		7 Payee address; City; State; Zip Code
OF EXPENDITURE Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete QNLY if direct expenditure to benefit C/OH Date O6/06/2022 Amount (\$) Payee name O6/06/2022 Amount (\$) TX PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Description Contributions/Donations Made By Candidate/Officeholder/Political Committee (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete QNLY if direct expenditure to benefit C/OH Date O3/26/2022 AACP - Missouri City Payee name O3/26/2022 NAACP - Missouri City Payee address; City; State; Zip Code Office sought Office held Office held Description Check if avasit n. Tx, officerbolder in repairs and in the top of this schedule) Check if Austin, Tx, officerbolder in grepnise Missouri City Juneteenth Gala Office held Date O3/26/2022 NAACP - Missouri City Payee name O3/26/2022 NAACP - Missouri City Payee address; City; State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category (see Categories issed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if avasit n. Tx, officerbolder viving expense MLK Breakfast Office held Complete QNLY if direct Candidate/Officeholder/Political Committee Office sought Office held		TX
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### PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule)	06/06/2022	Missouri City Juneteenth Committee
Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held Candidate/Officeholder name Office sought Office held Office held Date 03/26/2022 Amount (\$) Payee name NAACP - Missouri City Payee address; City; State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
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Date 03/26/2022 Payee name NAACP - Missouri City Amount (\$) Payee address; City; State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct Candidate/Officeholder name Office sought Office held	OF	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin. TX. officeholder living expense
NAACP - Missouri City Amount (\$) Payee address; City; State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
NAACP - Missouri City Amount (\$) Payee address; City; State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct Candidate/Officeholder name Office sought Office held	Date	Payee name
Amount (\$) Payee address; City; State; Zip Code TX PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Complete ONLY if direct Candidate/Officeholder name Office sought Office held		
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	\$300.00	
	PURPOSE OF	TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	TX (a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense MLK Breakfast Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 12/17 Rpt: 28/33	Wallace, Toni
4	Date	5 Payee name
	03/23/2022	Name Badges, Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$43.42	
		TX
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXTENSIONE	Check if Austin, TX, officeholder living expense
		Name Badges
0	Complete ONLY if direct	Candidate/Officeholder page
9	expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/05/2022	Outside Interactive, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.20	billing@BikeReg.com
		TX
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Registration Fee Check if travel outside of Texas. Complete Schedule T.
		Check if Austin. T.X., officeholder fiving expense 2nd Annual Fort Bend DA Ride for Survivors Event
		Zila Attilida Fort Bella DA Nide for Sulvivois Event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/24/2022	Painting With a Twist
	Amount (\$)	Payee address; City; State; Zip Code
	\$114.00	
		·
		TX
-	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Contributions/Donations Made By
	EXPENDITURE	Candidate/Officeholder/Political Committee
		Donation to Texas Exes Katy Chapter
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
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	rma provided by Toyon (thise Commission

			EXPENDITURE O	ATEGORIES FOI	BO	X 8(a)		
	ing nse onations Made By - iceholder/Political (Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services	Office Over Polling Ex Printing E Salaries/V	erhead pense kpense /ages/	Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel in District Travel Out of District OTHER (enter a category not listed above)
Credit Card Payin	ile il		The Instruction Guide	explains how to co	mple	te this form.		
Total pages So	chedule F1:	2 FILER NAMI	E				3	Filer ID
Sch: 13/17 R	Rpt: 29/33	Wallace, To	oni					
Date	!	5 Payee name						
06/23/2022		Parrott, Ra	lph					
Amount (\$)	\$175.00	7 Payee addre	ess; City;	State; Zip Co	ode			
		TX			1			
PURPOSE OF EXPENDITU		(a) Category (s	See Categories listed at the t JEXPENSE	op of this schedule)	(b)		n, TX,	de of Texas. Complete Schedule T. officeholder living expense S
Complete ON expenditure to			ficeholder name	Office so	ight			Office held
Date		Payee name	9					
02/14/2022		Phillips 66						
Amount (\$)	\$200.00	Payee addr	ess; City;	State; Zip C	ode			
		TX						
PURPOSI OF EXPENDITU			See Categories listed at the g Expense	top of this schedule)	(b)	Check if Austi	n, TX. ort (de of Texas. Complete Schedule T. , officeholder living expense Bend County Fair Go Tejano draiser
OF EXPENDITU	URE	(a) Category (Advertising		top of this schedule) Office so		Check if trave	n, TX. ort (officeholder living expense Bend County Fair Go Tejano
OF EXPENDITU	URE	(a) Category (Advertising Candidate/O	g Expense fficeholder name			Check if trave	n, TX. ort (, officeholder living expense Bend County Fair Go Tejano draiser
Complete ON expenditure to	URE NLY if direct to benefit C/O	(a) Category (Advertising Candidate/O	g Expense fficeholder name			Check if trave	n, TX.	, officeholder living expense Bend County Fair Go Tejano draiser
OF EXPENDITU Complete ON expenditure to	URE NLY if direct to benefit C/O	Candidate/OH Payee nam Postal & C	g Expense fficeholder name e Copy Center		ught	Check if trave	n, TX.	, officeholder living expense Bend County Fair Go Tejano draiser
Complete ON expenditure to Date 01/10/2022 Amount (\$)	NLY if direct to benefit C/Ot	Candidate/OH Payee nam Postal & C Payee addr	g Expense fficeholder name e Copy Center ess; City;	Office so State; Zip C	ught	Check if trave Check if Austi Basket for F Committee f	n, TX.	, officeholder living expense Bend County Fair Go Tejano draiser
Complete ON expenditure to Date 01/10/2022	SE	Candidate/OH Payee nam Postal & C Payee addr	g Expense fficeholder name e Copy Center ress; City;	Office so State; Zip C	ught	Check if trave Check if Austi Basket for F Committee f Description Check if wave	n, TX, ort { =uno	officeholder living expense Bend County Fair Go Tejano draiser Office held ide of Texas. Complete Schedule T. officeholder living expense

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political	Committee	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Expens Printing Expen		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	Credit Card Payment		The Instruction Guide explai	ns how to comp	ete this form.	
1	Total pages Schedule F1:	2 FILER NAM	AE.			3 Filer ID
	Sch: 14/17 Rpt: 30/33	Wallace,	Γoni			
4	Date	5 Payee nam	ne ·			
	02/16/2022	Precision	Graphix Group			
6	Amount (\$)	7 Payee add	ress; City; Sta	ate; Zip Code		
	\$50.00	precisiong	graphixgroup@gmail.com			
		TX				
8	PURPOSE	(a) Category	(See Categories listed at the top of this	schedule) (b)	Description	
	OF	Printing E		sciedule)		outside of Texas. Complete Schedule T.
	EXPENDITURE	3			Check if Austin	, TX, officeholder living expense
					Label Design	
9	Complete ONLY if direct expenditure to benefit C/Oh		fficeholder name	Office sought		Office held
-	Date	Payee nan	ne			
	02/19/2022	,	Graphix Group			
_	Amount (\$)	Payee add		ate; Zip Code		
	\$425.00	1	graphixgroup@gmail.com	ии, Др соце		
	Ψ+20.00	precision	graphing roup @gman.com			
		TX				
	PURPOSE OF		(See Categories listed at the top of this	schedule) (b	Description	
	EXPENDITURE	Printing E	xpense	1		outside of Texas. Complete Schedule T. TX, officeholder living expense
					Label Printing	
					200011111111	•
L	Complete ONLY if direct	Candidata/C	Officeholder name	Office sought		Office held
	expenditure to benefit C/O		Micerolder harrie	Office sough		Office field
L						
	Date	Payee nan				
	05/31/2022	Shipley D	onuts			
	Amount (\$)	Payee add	ress; City; St	ate; Zip Code		
	\$71.60					
		TX				
H	DUDDOOF.			10.		
1	PURPOSE OF	1	(See Categories listed at the top of this	s schedule) (D	Description Check if travel	outside of Texas. Complete Schedule T.
1	EXPENDITURE	Food/Be/	verage Expense			TX, officeholder living expense
						ee-on-Three Tournament
\vdash	Complete ONLY if direct	Candidate/0	Officeholder name	Office sough	1	Office held
	expenditure to benefit C/O			bough		-
H						
1						

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officehoider/Politica Credit Card Payment	
L Total pages Schedule F1:	
Sch: 15/17 Rpt: 31/33	Wallace, Toni
4 Date	5 Payee name
01/31/2022	South Texas College of Law
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code TX
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation to BLSA
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/07/2022	Texas Gulf Coast Area Labor Federation
Amount (\$)	Payee address; City; State; Zip Code
\$250.00	2506 Sutherland Houston, TX 77023
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sponsorship for Working Families Awards Celebration
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office sought Office held OH
Date 05/11/2022	Payee name The Brian Middleton Campaign
Amount (\$) \$100.00	Payee address; City; State; Zip Code TX
PURPOSE OF OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas, Complete Schedule T. Check if Austin, TX, officeholder living expense Partial Payment for DJ Music Services at Basketball Tournament
Complete ONLY if direct expenditure to benefit C/0	Candidate/Officeholder name Office sought Office held OH
Forms provided by Texas	Ethics Commission Manay ethics state ty us Version V3.5.1 fc88a7

			EXPENDITURE CATEG	ORIES FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Loan Repayi Office Overh Polling Expe Printing Expo Salaries/Wai	ment/Reimbursement nead/Rental Expense ense ense ges/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 explain	ns how to com	plete this form.		
	Total pages Schedule F1:	1				3 Filer ID	
	Sch: 16/17 Rpt: 32/33	Wallace, T	oni				
ŀ	Date	5 Payee name	9				
	05/17/2022	1	Middleton Campaign				
3	Amount (\$) \$185.00	7 Payee addre	ess; City; Sta	ate; Zip Cod	е		
3	PURPOSE OF EXPENDITURE		See Categories listed at the top of this	schedule)	Check if Austin	outside of Texas. Complete Schedule T. n. TX, officeholder living expense ent for Food Truck Vendors	
	Complete ONLY if direct expenditure to benefit C/O						
_	Date	Payee name	е				
	04/27/2022	Tiff's Treat					
	Amount (\$) \$56.75	Payee addr	ess; City; Sta	ate; Zip Cod	le .		
	DUDBOSE			· .		•	
	PURPOSE	THE STATE OF			b) Danier		
	OF EXPENDITURE		See Categories listed at the top of this erage Expense	schedule) . (Check if Austin	outside of Texas. Complete Schedule T. n. TX, officeholder living expense for Volunteers	
	OF	Food/Beve		Office soug	Check if travel Check if Austir Cookie Tray	n, TX, officeholder living expense	
	OF EXPENDITURE Complete ONLY if direct	Food/Beve	erage Expense fficeholder name		Check if travel Check if Austir Cookie Tray	n. TX, officeholder living expense for Volunteers	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Food/Beve Candidate/O	erage Expense fficeholder name		Check if travel Check if Austir Cookie Tray	n. TX, officeholder living expense for Volunteers	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	Candidate/O	erage Expense fficeholder name		Check if travel Check if Austir Cookie Tray	n. TX, officeholder living expense for Volunteers	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 02/03/2022 Amount (\$)	Candidate/OH Payee nam USPS	erage Expense fficeholder name	Office soug	Check if travel Check if Austir Cookie Tray	n. TX, officeholder living expense for Volunteers	
	OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 02/03/2022 Amount (\$)	Candidate/ODH Payee nam USPS Payee addi TX (a) Category	erage Expense fficeholder name	Office soug	Check if travel Check if Austir Cookie Tray	n. T.X., officeholder living expense for Volunteers Office held I outside of Texas. Complete Schedule T.	

POLITICAL EXPENDITURES FROM POLITICAL

CONTRIBUTIONS							
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Total pages Schedule F1:	2 FILER NAME		3 Filer ID				
Sch: 17/17 Rpt: 33/33 Date	Wallace, Toni 5 Payee name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
03/16/2022	Wristband Express						
Amount (\$) \$240.00	7 Payee address; City; 16000 West Rogers Drive Suite 100 New Berlin, WI 53151	State; Zip Code					
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the Advertising Expense	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wristbands					
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held				