UNSWORM	DECLARATION	FORM UD
Attach this unsw	orn declaration to the front of any	OFFICE USE ONLY
campaign finance	report or personal financial statement in ed signature. See Tex. Civil Practice and	Date Received
FILER ID: (Ethics Commission filers)		Method of Delivery
2 NAME OF FILER (PLEASE TYPE OR PRINT)	Eric Fasga	Date Processed
3 TYPE OF FILER	CANDIDATE/ OFFICEHOLDER	POLITICAL COMMITTEE
	JUDICIAL CANDIDATE/ OFFICEHOLDER	POLITICAL PARTY
	PERSONAL FINANCIAL STATEMENT	STATE/COUNTY CHAIR
	DIRECT CAMPAIGN EXPENDITURE	
4 TYPE OF REPORT	Finanicial Report	
7/17/23		
6 UNSWORN DECLARA	TION:	
My name is <u>Eric</u>	Fagan, and my date of birth is	5/21/60
My Address is	High Tide In learked. TK. (street) (city) (state)	(zip code) (country)
	enalty of perjury that the information in the attached report is	s in all things true and correct,
Government Code.		
Executed in <u>F4, Bena</u>	County, State of 700 on the 17 day of	July, 20 23.
	5	2

Revised 7/9/2020

		CEHOLDER E REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction C	Guide explains how	to complete this form.	1 Filer ID (Ethics Commission Filer	s) 2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR	FIRST	MI	OFFICE USE ONLY
NAME	NICKNAME	ERIC FAGA	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX	APT / SUITE #;	CITY: STATE: ZIP CODE	JUL 17 2023 FCV
Change of Address			1.1284	_
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (832)	283-2186	EXTENSION	Date Hand-delivered or Date Postmarked
6 CAMPAIGN TREASURER	MS / MRS	FIRST	m	Receipt # Amount \$ Date Processed
NAME	NICKNAME	Hunt	suffix SR	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)		NO PO BOX PLEASE); APT / S	the second se	STATE: ZIP CODE
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
9 REPORT TYPE	January 15 July 15	30th day before e		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)
10 PERIOD COVERED	Month	Day Year	Mont	h Day Year 7/17/23
11 ELECTION		TE Year Primary 24 General	ELECTION TY Runoff Other Description Special	
12 OFFICE	OFFICE HELD (if any)	iff	13 OFFICE SOUGHT (if know	own)
14 NOTICE FROM POLITICAL COMMITTEE(S)	THE CANDIDATE / OFFIC	EHOLDER. THESE EXPENDITURES	S MAY HAVE BEEN MADE WITHOUT THE C	S MADE BY POLITICAL COMMITTEES TO SUPPORT ANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.
00	COMMITTEE TYPE	COMMITTEE NAME		
Additional Pages	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TRE		
		COMMITTEE CAMPAIGN TR	EASURER ADDRESS	
		GO TO	PAGE 2	

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CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

15 C/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 35,701.53
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ \$232,25
	4. TOTAL POLITICAL EXPENDITURES	\$
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST OF REPORTING PERIOD	DAY \$
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF LAST DAY OF THE REPORTING PERIOD	THE \$
	wear, or affirm, under penalty of perjury, that the accompanying report is true guired to be reported by me under Title 15, Election Code.	and correct and includes all information
	Signature of Can	didate or Officeholder
	Please complete either option below:	
(1) Affidavit		
NOTARY STAMP/SEAL		
Sworn to and subscribed	before me by this the	day of,
20, to certify	which, witness my hand and seal of office.	
Signature of officer administer	ring oath Printed name of officer administering oath	Title of officer administering oath
	OR	
(2) Unsworn Declaratio	on	
My name is	, and my date of birth is	
My address is	······································	,,,,
		ate) (zip code) (country)
Executed in	County, State of, on theday of(month)	, 20 (year)
	Signature of Candida	te/Officeholder (Declarant)

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
FILER NAME	3 Filer ID (Ethics Commission Filers)
Date 5 Full name of contributor out-of-state PAC (ID#: Tamara + Craig Joseph 6 Contributor address; City; State; Zip Code 7803 Garland Path Ln Richmond, Tx 7740	7 Amount of contribution (\$) \$ 150 - 87
Principal occupation / Job title (See Instructions) 9 Employer (See	
Date Full name of contributor 🗍 out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See I	Instructions)
Date Full name of contributor of-state PAC (ID#:	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See	Instructions)
Date Full name of contributorout-of-state PAC (ID#: Contributor address; City; State; Zip Code) Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See	Instructions)
	1
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
FILER NAME	E	3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor Anthony Smith) 7 Amount of contribution (\$)
6/26	5 Full name of contributor Anthony Smith 6 Contributor address; City; State; Zlp Code 1302 Waugh Dr. #336 Houston Tx 7701	\$1,000 - 19 #2160
the state of the s	supation / Job title (See Instructions) 9 Employer (See Instructions)	
Date	Full name of contributor Out-of-state PAC (ID#:	Amount of contribution (\$)
6/25	William M. Shields Contributor address; City; State; Zip Code 11515 Lago Bella Dr Richmond Tx 7740	\$1,000 -
	upation / Job title (See Instructions) Employer (See Inst	
Date 6/10	Full name of contributor Dut-of-state PAC (ID#: Roosevelt Valecia Weeks Contributor address; City; State; Zip Code B 103 C4 pital Ct Pearland Tx 71584	
Principal occi	upation / Job title (See Instructions) Employer (See Instructions)	
Date	Full name of contributor	} Amount of contribution (\$)
Principal occ	upation / Job title (See Instructions) Employer (See In:	structions)
		5
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE A	SNEEDED

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
Th	e instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAM	E	3 Filer ID (Ethics Commission Filers)
4 Date (c) / 2 8 8 Principal occ	5 Full name of contributor □ out-of-state PAC (ID#: Zarek Rental, LLC 6 Contributor address; Cf City; State; Zip Code 1514 San Clemente PF Katy, Tx 77494 cupation / Job title (See Instructions) 9 Employer (See Instructions)	$ = \frac{1}{4387} $ Instructions) 7 Amount of contribution (\$) $ = \frac{1}{4387} $
Date 4/27 Principal occu	Full name of contributor I out-of-state PAC (ID#: Law offices of Willie D Powells II Contributor address: City; State; Zip Code 1322 Southwest Frug # 2010 Houston Tx 7 upation / Job title (See Instructions) Employer (See Instructions)	
Date Principal occ	Full name of contributor ☐ out-of-state PAC (ID#:	Amount of contribution (\$)
Date	Full name of contributor out-of-state PAC (ID#: Contributor address; City; State; Zip Code) Amount of contribution (\$)
Principal occ	upation / Job title (See Instructions) Employer (See	Instructions)
•	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE If contributor is out-of-state PAC, please see instruction guide for add	AS NEEDED litional reporting requirements.
		Revised 9/8/201

MONE	TARY POLITICAL CONTRI	BUTIONS	SCHEDULE A1
Th	e Instruction Guide explains how to complete this	s form.	1 Total pages Schedule A1:
FILER NAME	E		3 Filer ID (Ethics Commission Filers)
Date 5/20	5 Full name of contributor aut-of-state PAC Cynthia Lec 6 Contributor address; City; State 12207 Carrswold Dr. TION House		7 Amount of contribution (\$)
Principal occ	supation / Job title (See Instructions)	9 Employer (See Instruc	tions)
Date 5/21	Full name of contributor out-of-state PAC Barbara Henderson Contributor address; City; State 1930 Kingsley Dr# 9103 Pear		Amount of contribution (\$)
Principal occu	upation / Job title (See Instructions)	Employer (See Instruct	lions)
Date 5/26	Full name of contributor Dout-of-state PAG William Bobrick Contributor address; City; State P. O. Box 637 Sugar Land	; Zip Code 1 TX 77478	Amount of contribution (\$)
Principal occu	upation / Job title (See Instructions)	Employer (See Instruct	tions)
Date	Full name of contributor out-of-state PAC Contributor address; City; State	; (ID#:) e; Zip Code	Amount of contribution (\$)
Principal occu	upation / Job title (See Instructions)	Employer (See Instruct	lions)
			* •
	ATTACH ADDITIONAL COPIES O	F THIS SCHEDULE AS NE	EDED reporting requirements.

Date 5 Full name of contributor out-of-state PAC (IDE:) 7 Amount of contribution (\$) 5/20 6 Contributor address; City; State; Zip Code \$ 2.50 9 Employer (See Instructions) 9 Employer (See Instructions) \$ 2.50 Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDE:) Amount of contribution (\$) Date Full name of contributor	Date 5 Full name of contributor out-ot-state PAC (IDR) 7 Amount of contribution (\$) 240 6 Contributor address; City; State; Zip Code \$ 2.50 8335 Bird Mcadou Ln Missouri City, Tx 77489 \$ 2.50 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) \$ 2.50 Date Full name of contributor out-ot-state PAC (IDR	T	he Instruction Guide explains how to complete this for	orm.	1 Total pages Schedule A1:
Sharon Davis out-of-state PAC (IDF: // Annount of contribution (s) Sharon Davis 9 Employer (See Instructions) 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of contribution (s) Date Full name of contributor 0ut-of-state PAC (IDF: Amount of contribution (s) 5/20 Full name of contributor 0ut-of-state PAC (IDF: Amount of contribution (s) 5/20 Full name of contributor 0ut-of-state PAC (IDF: Amount of contribution (s) 5/20 Full name of contributor 0ut-of-state PAC (IDF: Amount of contribution (s) 5/20 Full name of contributor 0ut-of-state PAC (IDF: Amount of contribution (s) Date Full name of contributor 0ut-of-state PAC (IDF: 4 mount of contribution (s) Date Full name of contributor 0ut-of-state PAC (IDF: 4 mount of contribution (s) Date Full name of contributor 0ut-of-state PAC (IDF: 4 mount of contribution (s) 5/20 Slao City: State; Zip Code \$ 100 Date Full name of contributor 0ut-of-state PAC (IDF: 4 mount of contribution (s) 5/20 Fu	Sharon Davis But entropy of the serve to the serve	FILER NAM	IE	······	3 Filer ID (Ethics Commission Filers)
8335 Bird Mcadow Ln Missouri C: 15, Tx 71489 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor 0 ut-ot-state PAC (IDE:) Arrount of contribution 6 arrows for the state pace of the sta	8335 Bird Mcadow Ln Missauri C: G, T. 77489 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor 0 et-of-state PAC (DBC	Date		D#:)	7 Amount of contribution (\$)
Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) 5/20 Tracy Portis \$25 South Burderss; City; State; Zip Code \$25 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25 Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) \$120 Slap Contributor address; City; State; Zip Code \$100 Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$) Date Full name of contributor □ out-of-state PAC (IDF:) Amount of contribution (\$)	Date Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 Tracy Portis Contributor address; City: State; Zip Code \$2.5 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2.5 Date Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 Full name of contributor out-of-state PAC (IOF Amount of contribution (\$) 5/200 S201 Forest Cate DF Sugar Lad, T& 174465 \$250.00	5/20	6 Contributor address; City; State; 8335 Bird Meadow Ln Missour	Zip Code	\$ 2.50
S/20 Tracy Portis contributor address; I2014 Gnowbird Ct Statford, Tx 77477 4770 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25 Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) S/20 Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) Date Full name of contributor aut-of-state PAC (ID#:) Arnount of contribution (\$) 5/200 S2	S/A0 Tracy Portis Contributor address; Contributor address; Contributor address; Contributor address; City; State; Zip Code \$25 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$25 Date Full name of contributor 2007 Rearl BayCt Rearland Tx 17384 Amount of contribution (\$) \$100 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$100 Date Full name of contributor 2207 Rearl BayCt Rearland Tx 17384 Amount of contribution (\$) \$120 \$100 Date Full name of contributor 2207 Rearl BayCt Rearland Tx 17384 Amount of contribution (\$) \$207 Rearl BayCt Rearland Tx 17384 \$100 Date Full name of contributor 2207 Rearl BayCt Rearland Tx 17384 Amount of contribution (\$) \$207 Forest Cate Dr Sugar Land, Tx 17469 Amount of contribution (\$) \$2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$2500	Principal oc	cupation / Job title (See Instructions) 9	Employer (See Instruc	tions)
I2014 Gnowbird Cf Stafford, Tx 77477 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Date Sla0 Contributor address; City; State; Zip Code 201 Pearl BayCf Rearland Tx 17584 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Date Full name of contributor Date Full name of contributor Jout-of-state PAC (IDF: Amount of contributor Date MacK McDon ald Sla0 Contributor address: City: State; Zip Code \$207 Forest Gate Dr Sugar Land; Tx 17469	12014 Gnowbird Cf Stafford, Tx 77477 Principal occupation / Job title (See Instructions) Date Full name of contributor Barbara Curtis amount of contribution (\$) State Contributor address; Contributor address; City; State; Zip Code 2201 Reard BayCf Rearland Tx 17584 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) S120 Full name of contributor Contributor address; City; State; Zip Code 3201 Forest Gate Dr Sugar Land; Tx 17449 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions)				Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) Amount of contribution (\$) Slaco Contributor address; City; State; Zip Code 2207 Pearl BayCH Rearland TX 775844 \$100 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$100 Date Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of contribution (\$) 5/200 Sapar Forest Gate Dr Sugar Land; Tx 77469 \$2500	Principal accupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (IDR) Amount of contribution (\$) Amount of contribution (\$) SI200 Date Barbara Curtis City: State: Zip Code 2201 Rearl BayCH Rearland Tx 17584 \$ 100 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (IDR) Amount of contributor out-of-state PAC (IDR) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDR) Amount of contribution (\$) Date Full name of contributor out-of-state PAC (IDR) Amount of contribution (\$) 5/200 S201 Forest Cate Dr Sugar Land, Ix 171469 \$ 2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$ 2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$ 2500 Attack ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED Attack ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	5/20			\$25
Slao Barbara Curtis Slao Contributor address; City; State; Zip Code 2207 Pearl Bay CF Rearland Tx 77584 \$100 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contributor (\$) Date Full name of contributor I out-of-state PAC (ID#:) Amount of contribution (\$) Date Full name of contributor I out-of-state PAC (ID#:) Amount of contribution (\$) 5/20 Sack McDon ald Contributor address; City: State; Zip Code \$2500	Barbara Curtis \$ 100 2207 Part BayCh Ranland Tx 17584 \$ 100 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Mack McDon ald Amount of contribution (\$) 5/20 S207 Forest Gate Dr Sugar Land; Tx 17469 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor 0.00 0.00 5/20 S207 Forest Gate Dr Sugar Land; Tx 17469 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions)	Principal occ			ions)
Slao Contributor address; City; State; Zip Code \$ 100 2207 Pearl BayCH Rearland Tx 77584 \$ 100 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of contribution (\$) Date Full name of contributor I out-of-state PAC (ID#:) Amount of contribution (\$) 5120 Forest Gate Dr Sugar Land, Tx 77469 \$ 2500	Image: Second state in the second state is state in the second state in the second state is state in	Date)#:)	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Instruction out-of-state PAC (ID#:) Mack McDonald Amount of contribution (\$) 5/20 Contributor address; City: State; Zip Code \$207 Forest Gate Dr Sugar Land; Tx 77469 \$2500	Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#) Mack McDonald Amount of contribution (\$) 5/20 Contributor address; City: State; Zip Code 3207 Forest Cate Dr Sugar Land; Tx 17469 # 2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attract AdDitional Copies of THIS SCHEDULE AS NEEDED	5/20	Contributor address; City; State;		\$ 100
5/20 Mack McDonald Contributor address; City: State; Zip Code \$207 Forest Gate Dr Sugar Land; Tx 77469 \$2500	5/20 Mack McDonald Contributor address; City: State; Zip Code 3207 Forest Gate Dr Sugar Land; Tx 77469 \$2500 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attach Additional Copies of This Schedule As NEEDED	Principal occ		1	ions)
8207 Forest Gate Dr Sugar Land, Tx 77469	9207 Forest Gate Dr Sugar Land, Tx 77469 # 2500 Principal occupation / Job title (See Instructions) Employer (See Instructions))#:)	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Instructions)	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED	5120			\$2500
		Principal occ	upation / Job title (See Instructions)	Employer (See Instruct	ions)
					۰

1		
	The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NA	ME	3 Filer ID (Ethics Commission Filers)
4 Date 5/19	5 Full name of contributor aut-of-state PAC (ID#:) Virginia McBride 6 Contributor address; City; State; Zip Code 3107 Dandelion Dr. Richmond Tx 77469	7 Amount of contribution (\$) \$25
3 Principal o	ccupation / Job title (See Instructions) 9 Employer (See Instruct	tions)
Date 5/19	Full name of contributor out-of-state PAC (10#:) Tonja Thompson Contributor address; City; State; Zip Code 2111 Nashua Dr Stafford, Tx 77477	Amount of contribution (\$)
Principal oc	cupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)
5/19	Justine Cherne Contributor address; City; State; Zip Code 6028 Rawlings Rd Needville, TX 77461	\$200
Principal oc	cupation / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor [] out-of-state PAC (10#:) Falondria Wilson	Amount of contribution (\$)
-1-	Contributor address; City: State; Zip Code 710 Pine Crossing Cf Spring, TX 77373	\$250
5/20		
	ccupation / Job title (See Instructions) Employer (See Instructions)	tions)
5/20 Principal oc		tions)

MONE	TARY POLITICAL CONTRIB	UTIONS	SCHEDULE A1
The	Instruction Guide explains how to complete this for	orm.	1 Total pages Schedule A1:
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
4 Date 5/12 8 Principal occu	5 Full name of contributor I out-of-state PAC (III Mary Owens Groves 6 Contributor address; City; State; HTAL Alvin St Howston Tx pation / Job title (See Instructions) 9	Zip Code 770.33	7 Amount of contribution (\$) \$50 #176 ions)
Date	Full name of contributor Gout-of-state PAC (IE Contributor address; City; State;		Amount of contribution (\$)
Principal occup	pation / Job title (See Instructions)	Employer (See Instructi	ions)
Date Principal occuj	Full name of contributor Dout-of-state PAC (ID Contributor address; City; State;	Zip Code	Amount of contribution (\$)
Date	Full name of contributor Dout-of-state PAC (ID Contributor address; City; State;	#:) Zip Code	Amount of contribution (\$)
Principal occu	pation / Job title (See Instructions)	Employer (See Instructi	ons)

MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
Th	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	E	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor [] out-of-state PAC (ID#:) Gilbert + Felicia Thompson	7 Amount of contribution (\$)
5/19	6 Contributor address; City; State; Zip Code	# 2,000 # 08 69711350
3 Principal occ	Supation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
5/20	A.L. Carter + Associates Contributor address; City; State; Zip Code	\$200
		# 1707
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	stions)
Date	Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)
4/29	Mary Jo Salvaggio Contributor address; City; State; Zip Code 3727 County Seat Lane Richmond TX 77469	\$100
Principal occi	upation / Job title (See Instructions) Employer (See Instructions)	ctions)
Date	Full name of contributor Dout-of-state PAC (ID#:) Birdie M. Kelley	Amount of contribution (\$)
5/13	Contributor address: City: State; Zip Code 1631 S Glen Willow In Missouri City Ti 17489	\$ 100
Principal occ	upation / Job title (See Instructions) Employer (See Instructions)	in the second
		*
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS N If contributor is out-of-state PAC, please see instruction guide for additiona	IEEDED Il reporting requirements. Revised 9/8/20

MONETARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 5 Full name of contributor □ out-of-state PAC (ID#:	_ 7 Amount of contribution (\$)
20334 Gray Jearling Trl Tomball, Tx 77377 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	#341 tructions)
Date Full name of contributor out-of-state PAC (ID#:	_) Amount of contribution (\$)
5/20 Contributor address; City; State; Zip Code 20234 Benton Springs In Richmond TX77407	\$ 200 - # 2534
Principal occupation / Job title (See Instructions) Employer (See Inst	inuctions)
Date Full name of contributor out-of-state PAC (ID#: <i>Gilbert Thompson</i> <i>Contributor address; City; State; Zip Code</i> #086471/350	$\Rightarrow 2,000 \Rightarrow$
Principal occupation / Job title (See Instructions) Employer (See Inst	tructions)
Date Full name of contributor <pre> out-of-state PAC (ID#:</pre>	Amount of contribution (\$)
Principal occupation / Job title (See Instructions) Employer (See Inst	tructions)
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS If contributor is out-of-state PAC, please see instruction guide for addition Forms provided by Texas Ethics Commission www.ethics.state.tx.us	S NEEDED onal reporting requirements. Revised 9/8/201

Tł	ne instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAM	E	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor [] out-of-state PAC (ID#:) Guartus + Michelle Grave S	7 Amount of contribution (\$)
5/20/23	6 Contributor address; City; State; Zip Code P. O. Box 323 Needville, Tx 77461	\$ 2500 -
8 Principal occ	cupation / Job title (See Instructions) 9 Employer (See Instructions)	# 1108
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of contribution (\$)
5/20/23	Samuel + Lena Hobbs Contributor address; City; State; Zip Code 3709 Timber Grove Ct Pearland, Tx 77584	\$ 100 -
Principal occ	upation / Job title (See Instructions) Employer (See Instructions)	# 4179 tions)
Date	Full name of contributor [] out-of-state PAC (ID#:) Judith S. Harris	Amount of contribution (\$)
5/20/23	Contributor address; City; State; Zip Code 3226 Dandelion Dr Richmond, TXT7469	# 5163
Principal occ	upation / Job title (See Instructions) Employer (See Instructions)	tions)
Date 5/20/23	Full name of contributor aut-of-state PAC (1D#:) B. A + R. G Chatri Wala Contributor address; City; State; Zip Code 2506 Plantation Creak of Missauri City, Tx	Amount of contribution (\$)
Principal occ	upation / Job title (See Instructions) Employer (See Instruct	#1529 tions)
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	ETARY POLITICAL CONTRIBUTIONS	S SCHEDULE A
TI	he Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAM	1E	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor Linebarger Goggan Blair + Gampson LLP 6 Contributor address; City; State; Zip Code P. 0. Box 17428 Austin, Tx 78760	7 Amount of contribution (\$) \$\$ 1500 - \$\$ 4446790
B Principal oc		e Instructions)
Date	Full name of contributor arcus + Vakie Fagan Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occ	2215 Avenida LaQuinta St Houston, Tx 17077 upation / Job title (See Instructions) Employer (See	# 274 re Instructions)
Date 5 20 23	Full name of contributor <i>Mourhaf or Linda Sabouni</i> Contributor address; City; State; Zip Code	Amount of contribution (\$)
	upation / Job title (See Instructions) Employer (Se	# 745 re Instructions)
Date 5/20/29	Full name of contributor Valverde Family Ent, LLC Contributor address; City; State; Zip Code 11788 Pender Ln Stafford, TX, 77477	Amount of contribution (\$)
Principal occu	upation / Job title (See Instructions) Employer (See	e Instructions)
		₽ ₽

Th	ne instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAM		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor [] out-of-state PAC (ID#:) Ronald Rash	7 Amount of contribution (\$)
5/20/23	6 Contributor address; City; State; Zip Code 1602 Bogard Ct Sugar Land Tx 77479	# 200 - # 4463
8 Principal occ	cupation / Job title (See Instructions) 9 Employer (See Instruc	ctions)
Date	Full name of contributor [] out-of-state PAC (ID#:) Frank + Deborah Fraley	Amount of contribution (\$)
5/20/23	Contributor address; City; State; Zip Code 18327 Meadow Crest Dr Meadows Place TX 77477	150 -
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	
Date	Full name of contributor	Amount of contribution (\$)
5/a0/23	Yuonne D Compean Contributor address; City; State; Zip Code 1821 James St Rosenberg, Tx 77471	\$ 100 -
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	#5447 tions)
Date	Full name of contributor [] out-of-state PAC (ID#:)	Amount of contribution (\$)
5/a0/ a3	Charles + Cynthia Sutton Contributor address; City; State; Zip Code 1807 Sutters Chase Dr Sugar Land, Tx 17479	\$ 150 - #5995
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	
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		SCHEDULE A
Th	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAM	E	3 Filer ID (Ethics Commission Filers)
Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of contribution (\$)
5/20/23	6 Contributor address; City; State; Zip Code	\$2500-
1 1.0	27823 Hunt Trace In Fulshcar, Tx 774+1	#7603
Principal occ	supation / Job title (See Instructions) 9 Employer (See Instru	ctions)
Date	Full name of contributor	Amount of contribution (\$)
	Mattie C. Provost	\$ 1000 -
20/23	Contributor address; City; State; Zip Code	
	2003 Taylor Marie Trl Katy Tx 77494	# 82.70
Principal occi	upation / Job title (See Instructions) Employer (See Instructions)	clions)
Date	Full name of contributor	Amount of contribution (\$)
	Mary Owens Groves Contributor address; City; State; Zip Code 4726 Alvin St Houston Tx 77033	4.00
5/12/23	Contributor address; City; State; Zip Code	\$50-
1	4726 Alvin St Houston 1x 71033	# 176
Principal occ	upation / Job title (See Instructions) Employer (See Instruc-	tions)
Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of contribution (\$)
	Mary Jo Salvaggio	\$ 100 -
4/29/23	Contributor address; City; State; Zip Code	
	3727 County Seat Lane Richmond, Tx 77469	# 4915
141/43		
	upation / Job title (See Instructions) Employer (See Instructions)	tions)

Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
	3 Filer ID (Ethics Commission Filers)
5 Full name of contributor Janct Dawson 6 Contributor address; City; State; Zip Code 431 Mist flower Dr Richmond Tx 77469	7 Amount of contribution (\$) \$ 100 # 1009
Full name of contributor I out-of-state PAC (ID#:) Carol Hampton Contributor address; City; State; Zip Code	Amount of contribution (\$)
	#1348 tions)
Full name of contributor	\$ 200
ation / Job title (See Instructions) Employer (See Instruct	# 1707 tions)
Full name of contributor Birdie M. Kelley Contributor address; City; State; Zip Code 7.631 S. Glan Willow In Missouri City TX 77489	Amount of contribution (\$)
	#5934 tions)
	Đ
	Janct Dawson 6 Contributor address; City; State; Zip Code 431 Mist flower Dr Richmond Tx 774 69 pation / Job title (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) 9 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#;) Carol Hampton City; State; Zip Code 5622 Larchbrook Dr Houston Tx 77049 ation / Job title (See Instructions) Employer (See Instruct Full name of contributor out-of-state PAC (ID#;) A.L. Carter + Associates City; State; Zip Code ation / Job title (See Instructions) Employer (See Instruct Full name of contributor out-of-state PAC (ID#;) A.L. Carter + Associates City; State; Zip Code ation / Job title (See Instructions) Employer (See Instruct Full name of contributor out-of-state PAC (ID#;) A.L. Carter + Associates Employer (See Instruct Sirdie M. Kelley contributor address; City: State; Zip Code 1631 S. Glen Willow Ln Missouri City Tx T14 89

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MONE	TARY POLITICAL CONTRIBUTIONS	SCHEDULE A
Th	e Instruction Guide explains how to complete this form.	1 Total pages Schedule A1:
2 FILER NAM	E	3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor [] out-of-state PAC (ID#:)	7 Amount of contribution (\$)
5/19/23	Everette + Tracy Penn 6 Contributor address; City; State; Zip Code 2726 Bissonnet #240 Houston, Tx 77005	\$ 250-
S/ I I/AS	2726 Bissonnet #240 Houston, Tx T7005	#483
Principal occ	supation / Job title (See Instructions) 9 Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
120/23	Darrell + Felicia Doyle Contributor address; City; State; Zip Code 2435 Plantation Bend Dr Sugar Land, Tx 77478	\$ 600 -
190/25	2435 Plantation Bend Dr Sugar Land, Tx 77478	#1226
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	tions)
Date	Full name of contributor	Amount of contribution (\$)
	Rosevelt + Lorainne Nesbitt	\$ 150 -
5/20/23	Contributor address; City; State; Zip Code 8906 N Caulder Way Missouri City, Tx 77459	# 10254
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	
Date	Full name of contributor	Amount of contribution (\$)
5/19/23	Crockeff + Sons Enterprises Inc. Contributor address; City; State; Zip Code	# 1000 -
1.0	13111 Westheimer # 101 Houston, Tx 77077	¥1088
Principal occu	upation / Job title (See Instructions) Employer (See Instructions)	tions)
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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1:	
2 FILER NAME				
			3 Filer ID (Ethics Commission Filers)	
Date	5 Full name of contributor		C (ID#:)	7 Amount of contribution (\$)
	Lacy Beccera			# 200-
5/20/23	6 Contributor address;	City; State	e; Zip Code	4 200
				cash
Principal occi	upation / Job title (See Instructions)	····· ···· ·	9 Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Maxie Family			4 57
120/23	Contributor address;	City; State	e; Zip Code	\$ 50
	•			cash
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PA	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City; State	; Zip Code	
Principal occu	pation / Job title (See Instructions)		Employer (See Instruc	tions)
Date	Full name of contributor	out-of-state PAC	C (ID#:)	Amount of contribution (\$)
	Contributor address;	City; State	e; Zip Code	:
	ş •1			-
Principal occu	pation / Job title (See Instructions)	a managanana a antara ani anj pajanani	Employer (See Instruct	lions)
			I	

Attach this unsu	vorn declaration to the front of any	OFFICE USE ONLY
	report or personal financial statement in	Date Received
	ed signature. See Tex. Civil Practice and	
Remedies Code § 13		JUL 17 2023
FILER ID:		-
(Ethics Commission filers)		
2 NAME OF FILER		Method of Delivery
(PLEASE TYPE OR PRINT)	Eric Fasan	Date Processed
TYPE OF FILER	X CANDIDATE/ OFFICEHOLDER	POLITICAL COMMITTEE
	JUDICIAL CANDIDATE/ OFFICEHOLDER	DOUTION DADTY
	JUDICIAL CANDIDATE/ OFFICEHOLDER	POLITICAL PARTY
	PERSONAL FINANCIAL STATEMENT	STATE/COUNTY CHAIR
	DIRECT CAMPAIGN EXPENDITURE	
4 TYPE OF REPORT		
	Finanicial Report	
5 DUE DATE	TITUNICIAL CEPOI	
7/17/22		
6 UNSWORN DECLARA	TION:	and and a second se
		,
My name is Eric	Faggn, and my date of birth is	5/21/60
	, i i i i i i i i i i i i i i i i i i i	
My Address is	(street) (city) (state)	7758.4
	(street) (city) (state)	(zip code) (country)
	penalty of perjury that the information in the attached report is on required to be reported by me under Title 15, Election Cod	
Government Code.		
Executed in Ft, Bena	County, State of 700 on the 17 day of	July, 20 23.
		/
	1 Ain 4	Jagas
		techepresentative