

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 1**

<b>The C/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers)	<b>2</b> Total pages filed: 22			
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST <b>Patrick</b>	MI	<b>OFFICE USE ONLY</b>  Date Received  <b>RECVD 07/15/2024</b>  Date Hand-delivered or Date Postmarked  Receipt #      Amount \$  Date Processed  Date Imaged		
	NICKNAME	LAST <b>Quincy</b>	SUFFIX			
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT / SUITE #:	CITY:			
	<b>5614 W. Grand Pkwy S. Ste. 102 #253 Richmond, TX 77406</b>				STATE:      ZIP CODE	
<b>5</b> CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <b>( 832 )</b>	PHONE NUMBER <b>534-0648</b>	EXTENSION			
<b>6</b> CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <b>Tunisha</b>	MI			
	NICKNAME	LAST <b>Quincy</b>	SUFFIX			
<b>7</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE):		APT / SUITE #:	CITY:	STATE:	ZIP CODE
	<b>5614 W. Grand Pkwy S. Ste. 102 #253 Richmond, TX 77406</b>					
<b>8</b> CAMPAIGN TREASURER PHONE	AREA CODE <b>( 832 )</b>	PHONE NUMBER <b>534-0648</b>	EXTENSION			
<b>9</b> REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)		
	<input checked="" type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded Modified Reporting Limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)		
<b>10</b> PERIOD COVERED	Month	Day	Year	Month	Day	Year
	<b>02</b>	<b>25</b>	<b>2024</b>	THROUGH	<b>06</b>	<b>30</b>
<b>11</b> ELECTION	ELECTION DATE			ELECTION TYPE		
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description
			<b>11 / 05 / 2024</b>	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special	
<b>12</b> OFFICE	OFFICE HELD (if any) <b>None</b>			<b>13</b> OFFICE SOUGHT (if known) <b>Fort Bend County Constable Precinct 4</b>		
<b>14</b> NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.					
	COMMITTEE TYPE	COMMITTEE NAME				
	<input type="checkbox"/> GENERAL					
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS				
		COMMITTEE CAMPAIGN TREASURER NAME				
	COMMITTEE CAMPAIGN TREASURER ADDRESS					

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# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH  
COVER SHEET PG 2**

<b>15 C/OH NAME</b> Quincy, Patrick		<b>16 Filer ID (Ethics Commission Filers)</b>
<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,790.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,568.67
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 15,373.68
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 11,087.72

**18 SIGNATURE** I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Signature of Candidate or Officeholder

**Please complete either option below:**

**(1) Affidavit**

NOTARY STAMP / SEAL

Sworn to and subscribed before me by \_\_\_\_\_ this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath                      Printed name of officer administering oath                      Title of officer administering oath

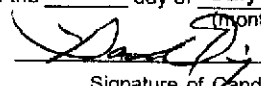
OR

**(2) Unsworn Declaration**

My name is Patrick Quincy, and my date of birth is 03/01/1981.

My address is 5614 W. Grand Pkwy S. Ste. 102 #253, Richmond, TX, 77406, United States.  
(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of Texas, on the 15 day of July, 20 24.  
(month) (year)



Signature of Candidate/Officeholder (Declarant)

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Quincy, Patrick	<b>19 Filer ID</b>
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<b>20 SCHEDULE SUBTOTALS</b>		<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 6,240.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 550.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 1,200.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 5,167.95
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 400.72
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/9 Rpt: 4/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> Date 06/29/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahmed, Farha	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>6</b> Contributor address; City; State; Zip Code 6 Ellicott Way  Sugar Land, TX 77479		
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Self Employed
Date 03/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Al-Amin, Taniya	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 20130 Linden Spruce Ln  Richmond, TX 77407		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fort Bend County
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Robert	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 28006 Silver Stream Ct  Fulshear, TX 77441		
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Harris County
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Robert	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 28006 Silver Stream Ct  Fulshear, TX 77441		
Principal occupation / Job title (See Instructions) Police Officer		Employer (See Instructions) Harris County
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobrick, William	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code PO Box 637  Sugar Land, TX 77487		
Principal occupation / Job title (See Instructions) Supervisor		Employer (See Instructions) Fort Bend County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/9 Rpt: 5/22
2 FILER NAME Quincy, Patrick		3 Filer ID
4 Date 06/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobrick, William	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code PO Box 637  Sugar Land, TX 77487		
8 Principal occupation / Job title (See Instructions) Supervisor		9 Employer (See Instructions) Fort Bend County
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawkins, Mary	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code 6831 River Bluff DR.  Houston, TX 77085		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dotson, Twila	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 6906 Songbrook Dr.  Houston, TX 77083		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 06/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Manuel	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code 4519 Butler Springs Ln  Katy, TX 77494		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Harris County
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gibbs, Ericka	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 5831 Ruby Heights Ln  Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Fort Bend County

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/9 Rpt: 6/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> Date 05/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, William	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code 6831 Cypresswood Dr.  Spring, TX 77379	
<b>8</b> Principal occupation / Job title (See Instructions) Law Enforcement		<b>9</b> Employer (See Instructions) Harris County
<b>Date</b> 03/12/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Guinn, Zerick	<b>Amount of Contribution (\$)</b> \$50.00
	<b>Contributor address; City; State; Zip Code</b> 1001 S Richey St.  Pasadena, TX 77506	
<b>Principal occupation / Job title (See Instructions)</b> Law Enforcement		<b>Employer (See Instructions)</b> Harris County
<b>Date</b> 05/19/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Judy	<b>Amount of Contribution (\$)</b> \$25.00
	<b>Contributor address; City; State; Zip Code</b> 3226 Dandelion Dr.  Richmond, TX 77469	
<b>Principal occupation / Job title (See Instructions)</b> Retired		<b>Employer (See Instructions)</b>
<b>Date</b> 06/25/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Kevin	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b> 18811 Waverly Springs Ln  Cypress, TX 77429	
<b>Principal occupation / Job title (See Instructions)</b> Police Officer		<b>Employer (See Instructions)</b> Harris County
<b>Date</b> 06/13/2024	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Kendralyn	<b>Amount of Contribution (\$)</b> \$40.00
	<b>Contributor address; City; State; Zip Code</b> 7210 Reading Rd.  Rosenberg, TX 77469	
<b>Principal occupation / Job title (See Instructions)</b> Attorney		<b>Employer (See Instructions)</b> Fort Bend County

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/9 Rpt: 7/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> Date 05/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferson, Joshua <hr/> <b>6</b> Contributor address; City; State; Zip Code 3327 Falcon Trail Dr  Spring, TX 77373	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Law Enforcement		<b>9</b> Employer (See Instructions) Harris County
Date 06/27/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferson, Joshua <hr/> Contributor address; City; State; Zip Code 3327 Falcon Trail Dr  Spring, TX 77373	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Harris County
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Carolyn <hr/> Contributor address; City; State; Zip Code P.O. Box 149  Kendleton, TX 77451	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) City Office		Employer (See Instructions) Self Employed
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) June, Saba <hr/> Contributor address; City; State; Zip Code 17407 Woodfalls Ln  Richmond, TX 77407	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Fort Bend County
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) June, Saba <hr/> Contributor address; City; State; Zip Code 17407 Woodfalls Ln  Richmond, TX 77407	Amount of Contribution (\$)  \$10.00
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Fort Bend County

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 5/9 Rpt: 8/22
2 FILER NAME Quincy, Patrick		3 Filer ID
4 Date 06/26/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Birdie ..... 6 Contributor address; City; State; Zip Code 7631 S. Glen Willow Ln.  Missouri City, TX 77489	7 Amount of Contribution (\$)  \$20.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Evett ..... Contributor address; City; State; Zip Code 2835 Lakeshore Harber Dr.  Missouri City, TX 77459	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Fort Bend County
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lary, Lanetra ..... Contributor address; City; State; Zip Code 1203 Governor Dr.  Rosenberg, TX 77469	Amount of Contribution (\$)  \$30.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fort Bend County
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Natalie ..... Contributor address; City; State; Zip Code 11104 Sunnyslope Dr.  Kansas City, MO 64134	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) COO		Employer (See Instructions) KC Scholars
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Jerome ..... Contributor address; City; State; Zip Code 17423 Katy Fwy  Houston, TX 77094	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Harris County



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/9 Rpt: 9/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> Date 03/09/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Gerrick	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code 10708 Big Bend Ave  Baton Rouge, LA 70814		
<b>8</b> Principal occupation / Job title (See Instructions) Retired		<b>9</b> Employer (See Instructions)
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Okoronkwo, Stephen	Amount of Contribution (\$)  \$60.00
Contributor address; City; State; Zip Code 10731 Craddock Dr.  Houston, TX 77099		
Principal occupation / Job title (See Instructions) Mental Health		Employer (See Instructions) UHS
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randolph, Tentra	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 4131 Boynton Dr.  Houston, TX 77045		
Principal occupation / Job title (See Instructions) Administration		Employer (See Instructions) Fort Bend County
Date 03/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smink, Bryan	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 8907 Cresting Ridge  Richmond, TX 77406		
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Fort Bend County
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Winona	Amount of Contribution (\$)  \$300.00
Contributor address; City; State; Zip Code 2115 McCrary Rd  Richmond, TX 77406		
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self Employed

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/9 Rpt: 10/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> Date 05/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tahir, Imran	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>6</b> Contributor address; City; State; Zip Code 18939 Oakworth Meadow Ct  Richmond, TX 77407		
<b>8</b> Principal occupation / Job title (See Instructions) Self Employed		<b>9</b> Employer (See Instructions)
Date 06/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tahir, Imran	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 18939 Oakworth Meadow Ct  Richmond, TX 77407		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 06/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Ashley	Amount of Contribution (\$)  \$170.00
Contributor address; City; State; Zip Code 6434 Terrell Dr.  Pearland, TX 77584		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turki, Arkan	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 20510 Walnut Canyon Dr  Katy, TX 77450		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)
Date 04/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turki, Arkan	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 20510 Walnut Canyon Dr  Katy, TX 77450		
Principal occupation / Job title (See Instructions) Student		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/9 Rpt: 11/22
2 FILER NAME Quincy, Patrick		3 Filer ID
4 Date 04/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turki, Emad	7 Amount of Contribution (\$)  \$100.00
6 Contributor address; City; State; Zip Code 20510 Walnut Canyon  Katy, TX 77450		
8 Principal occupation / Job title (See Instructions) Self Employed		9 Employer (See Instructions)
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turki, Emad	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 20510 Walnut Canyon  Katy, TX 77450		
Principal occupation / Job title (See Instructions) Self Employed		Employer (See Instructions)
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Turner, Carmen	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 1317 Eugene Heimann Cir.  Richmond, TX 77469		
Principal occupation / Job title (See Instructions) Elected Official		Employer (See Instructions) Fort Bend County
Date 05/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Beverly	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code P.O. Box 27005  Houston, TX 77277		
Principal occupation / Job title (See Instructions) County Government		Employer (See Instructions) Fort Bend County
Date 03/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Michael	Amount of Contribution (\$)  \$20.00
Contributor address; City; State; Zip Code 3018 Apple Valley Ln  Missouri City, TX 77459		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/9 Rpt: 12/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> Date 05/10/2024	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Terrance <b>6</b> Contributor address; City, State; Zip Code 7526 Brackstone Ct Richmond, TX 77407	<b>7</b> Amount of Contribution (\$) \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Law Enforcement		<b>9</b> Employer (See Instructions) Harris County

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A2: Sch: 1/1 Rpt: 13/22	
2 FILER NAME Quincy, Patrick		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 06/28/2024	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bounce That LLC	8 Amount of contribution (\$) \$200.00	9 In-kind contribution description Bounce House Donation for Event
7 Contributor address; City; State; Zip Code 9711 S. Mason Rd.  Richmond, TX 77407		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viva Balloons and More	Amount of contribution (\$) \$150.00	In-kind contribution description Event Planning and Decorating
Contributor address; City; State; Zip Code 6434 Terrell Dr.  Pearland, TX 77584		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Viva Balloons and More	Amount of contribution (\$) \$200.00	In-kind contribution description Event Planning and Decorations
Contributor address; City; State; Zip Code 6434 Terrell Dr.  Pearland, TX 77584		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/2 Rpt: 14/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		\$
<b>5</b> Date of loan 06/03/2024	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Quincy, Patrick	<b>9</b> Loan Amount (\$) \$200.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 5614 W. Grand Pkwy S. #102	<b>10</b> Interest Rate
	Richmond, TX 77406	<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) Law Enforcement		<b>13</b> Employer (See Instructions) Fort Bend County
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)
Date of loan 06/24/2024	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Quincy, Patrick	Loan Amount (\$) \$500.00
Is lender a financial institution? No	Lender address; City; State; Zip Code 5614 W. Grand Pkwy S. #102	Interest Rate
	Richmond, TX 77406	Maturity Date
Principal occupation / Job title (See Instructions) Law Enforcement		Employer (See Instructions) Fort Bend County
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal occupation		Employer (See Instructions)

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 2/2 Rpt: 15/22
<b>2</b> FILER NAME Quincy, Patrick		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 06/28/2024	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Quincy, Patrick	<b>9</b> Loan Amount (\$) \$500.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 5614 W. Grand Pkwy S. #102	<b>10</b> Interest Rate
	Richmond, TX 77406	<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions) Law Enforcement		<b>13</b> Employer (See Instructions) Fort Bend County
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor	<b>19</b> Amount Guaranteed (\$)
	<b>18</b> Guarantor address; City; State; Zip Code	
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/6 Rpt: 16/22	<b>2</b> FILER NAME Quincy, Patrick	<b>3</b> Filer ID
<b>4</b> Date 06/24/2024	<b>5</b> Payee name Aviva Wholesale	
<b>6</b> Amount (\$) \$45.97	<b>7</b> Payee address; City; State; Zip Code 10355 Harwin Dr.  Houston, TX 77036	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign T-Shirts
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 06/20/2024	Payee name Beach House on the Brazos	
Amount (\$) \$70.00	Payee address; City; State; Zip Code 211 5th St.  Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign T-Shirt Printing
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 06/28/2024	Payee name Beach House on the Brazos	
Amount (\$) \$42.00	Payee address; City; State; Zip Code 211 5th St.  Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign T-Shirt Printing
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/6 Rpt: 17/22	<b>2</b> FILER NAME Quincy, Patrick	<b>3</b> Filer ID
<b>4</b> Date 06/05/2024	<b>5</b> Payee name Fort Bend County Fairgrounds	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 4310 TX-36 S  Rosenberg, TX 77471	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Venue Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
Date 06/13/2024	Payee name Hernandez, Alex	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 114 Clifton St.  Houston, TX 77011	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Beverages for Event
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held
Date 06/28/2024	Payee name Howarth, Christy	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 5002 Blue Water Ln  Dickinson, TX 77539	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Material Printing
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/6 Rpt: 18/22	<b>2</b> FILER NAME Quincy, Patrick	<b>3</b> Filer ID
<b>4</b> Date 05/01/2024	<b>5</b> Payee name Numero	
<b>6</b> Amount (\$) \$25.00	<b>7</b> Payee address; City; State; Zip Code 200 Spectrum Center Dr  Irvine, CA 92618	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation Service Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/03/2024	Payee name Numero	
Amount (\$) \$25.00	Payee address; City; State; Zip Code 200 Spectrum Center Dr  Irvine, CA 92618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online Donation Service Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/27/2024	Payee name Numero	
Amount (\$) \$178.20	Payee address; City; State; Zip Code 200 Spectrum Center Dr  Irvine, CA 92618	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Donation Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/6 Rpt: 19/22	<b>2</b> FILER NAME Quincy, Patrick	<b>3</b> Filer ID
<b>4</b> Date 06/24/2024	<b>5</b> Payee name Office Max	
<b>6</b> Amount (\$) \$35.60	<b>7</b> Payee address; City; State; Zip Code 23610 Westheimer Pkwy  Katy, TX 77494	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Office Supplies
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 06/24/2024	Payee name Restaurant Depot	
Amount (\$) \$504.04	Payee address; City; State; Zip Code 11290 Bissonnet St.  Houston, TX 77099	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food for Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 06/10/2024	Payee name Sam's Club	
Amount (\$) \$113.84	Payee address; City; State; Zip Code 22402 Bellaire Blvd  Richmond, TX 77407	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food and Supplies for Event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/6 Rpt: 20/22	<b>2</b> FILER NAME Quincy, Patrick	<b>3</b> Filer ID
<b>4</b> Date 06/28/2024	<b>5</b> Payee name Sam's Club	
<b>6</b> Amount (\$) \$122.00	<b>7</b> Payee address; City; State; Zip Code 22402 Bellaire Blvd  Richmond, TX 77407	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for Event
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 05/17/2024	Payee name TGM Printing	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 13910 Murphy Rd.  Stafford, TX 77477	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing Expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 06/24/2024	Payee name Viva Balloons and More	
Amount (\$) \$38.40	Payee address; City; State; Zip Code 6434 Terrell Dr.  Pearland, TX 77584	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Decorations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/6 Rpt: 21/22	<b>2</b> FILER NAME Quincy, Patrick	<b>3</b> Filer ID	
<b>4</b> Date 05/24/2024	<b>5</b> Payee name Zoom		
<b>6</b> Amount (\$) \$167.90	<b>7</b> Payee address; City; State; Zip Code 55 Almaden Blvd  San Jose, CA 95113		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Office Expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/1 Rpt: 22/22	<b>2</b> FILER NAME Quincy, Patrick	<b>3</b> Filer ID
<b>4</b> Date 05/10/2024	<b>5</b> Payee name Ruchi's Mexican Grill	
<b>6</b> Amount (\$)  \$400.72  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 6945 Industrial Pkwy  Rosenberg, TX 77471	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Event Expense	<b>(b) Description</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event Venue Expense
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held