

# 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>		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <i>Mr.</i>	FIRST <i>Taral</i>	MI <input checked="" type="checkbox"/>	<b>OFFICE USE ONLY</b>
	NICKNAME	LAST <i>Patel</i>	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <i>PO Box 2653 Sugar Land TX</i>			
<input type="checkbox"/> Change of Address				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE <i>(974)</i>	PHONE NUMBER <i>217 2818</i>	EXTENSION	Date Received  <b>JUL 15 2024 RCVD</b>
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <i>Mr.</i>	FIRST <i>S.</i>	MI <i>Qaisar</i>	Date Hand-delivered or Date Postmarked
	NICKNAME <i>"Q"</i>	LAST <i>Imam</i>	SUFFIX	Receipt #
7 CAMPAIGN TREASURER ADDRESS	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <i>19 Saint Christopher St. Sugar Land TX 77479</i>			Amount \$
(Residence or Business)				Date Processed
8 CAMPAIGN TREASURER PHONE	AREA CODE <i>(281)</i>	PHONE NUMBER <i>467</i>	EXTENSION <i>9545</i>	Date Imaged
9 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)			
10 PERIOD COVERED	Month    Day    Year <i>2 / 25 / 2024</i>		THROUGH	Month    Day    Year <i>6 / 30 / 2024</i>
11 ELECTION	ELECTION DATE Month    Day    Year <i>11 / 5 / 2024</i>		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other Description <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known) <i>Fort Bend County Precinct 3 Commission</i>		
14 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
<input type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS		
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

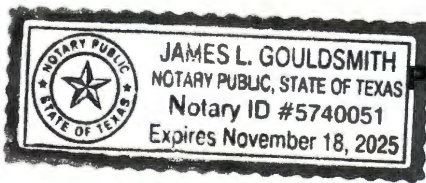
FORM C/OH  
COVER SHEET PG 2

15 C/OH NAME Taral Patel Campaign 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)	\$ <del>127,111.00</del>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>127,111.00</u>
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>125,888.79</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ <u>101,240.61</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

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.

Taral Patel  
Signature of Candidate or Officeholder



Please complete either option below:

(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by JLP this the 15 day of July, 2024, to certify which, witness my hand and seal of office.

[Signature] Printed name of officer administering oath James L Gouldsmith Title of officer administering oath notary

OR

(2) Unsworn Declaration

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.

(street) (city) (state) (zip code) (country)

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(month) (year)

\_\_\_\_\_  
Signature of Candidate/Officeholder (Declarant)



# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 127,111.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 125,888.79
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Koger</i>	7 Amount of contribution (\$)
<i>3/13/24</i>	6 Contributor address; City; State; Zip Code <i>6323 Carnaby Lane Rosenberg TX 77471</i>	<i>10</i>
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Anand Chaudhri</i>	Amount of contribution (\$)
<i>3/13/24</i>	Contributor address; City; State; Zip Code <i>22214 N. Lake Village Dr. Katy TX 77450</i>	<i>50</i>
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Deloitte</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Scott Partney</i>	Amount of contribution (\$)
<i>3/8/24</i>	Contributor address; City; State; Zip Code <i>12917 Kingsbridge Houston TX 77077</i>	<i>5</i>
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jay Jenkins</i>	Amount of contribution (\$)
<i>3/7/24</i>	Contributor address; City; State; Zip Code <i>932 Piner St. Houston TX 77009</i>	<i>50</i>
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Texas Center for Justice &amp; Equity</i>

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Devesh Mody</i>	7 Amount of contribution (\$)  <i>50</i>
<i>3/7/24</i>	6 Contributor address; City; State; Zip Code <i>4515 Tamarind Trl Irving TX 77345</i>	
8 Principal occupation / Job title (See Instructions) <i>Civil Engineer</i>		9 Employer (See Instructions) <i>Parsons</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcia Simmons</i>	Amount of contribution (\$)  <i>25</i>
<i>3/7/24</i>	Contributor address; City; State; Zip Code <i>3624 S. Hills Ave Fort Worth TX 76109</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>KT Musselman</i>	Amount of contribution (\$)  <i>25</i>
<i>3/7/24</i>	Contributor address; City; State; Zip Code <i>PO Box 170237 Austin TX 78717</i>	
Principal occupation / Job title (See Instructions) <i>Justice of Peace</i>		Employer (See Instructions) <i>Willinson County</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mary Alice Davis</i>	Amount of contribution (\$)  <i>10</i>
<i>3/6/24</i>	Contributor address; City; State; Zip Code <i>23207 Meadow Cross Lane Katy TX 77494</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>retired</i>

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# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cynthia Cole</i>	7 Amount of contribution (\$) <i>100</i>
	6 Contributor address; City; State; Zip Code <i>20119 Yorkway Pr. Katy TX 77450</i>	
8 Principal occupation / Job title (See Instructions) <i>Executive Director</i>		9 Employer (See Instructions) <i>AFSCME Local 1550</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chabilla Robinson</i>	Amount of contribution (\$) <i>1000</i>
<i>5/13/24</i>	Contributor address; City; State; Zip Code <i>8403 Fulsher Run Tree Richmond TX 77406</i>	
Principal occupation / Job title (See Instructions) <i>Chief Learning Officer</i>		Employer (See Instructions) <i>Dalita Kidney Care</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mohammed Asaduzzaman</i>	Amount of contribution (\$) <i>500</i>
<i>4/26/24</i>	Contributor address; City; State; Zip Code <i>2602 Ravenlake Ct. Pearland TX 77584</i>	
Principal occupation / Job title (See Instructions) <i>CPA</i>		Employer (See Instructions) <i>CAA</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Atri Sen</i>	Amount of contribution (\$) <i>500</i>
<i>5/10/24</i>	Contributor address; City; State; Zip Code <i>27823 Desert Manor Ln Katy TX 77494</i>	
Principal occupation / Job title (See Instructions) <i>CEO</i>		Employer (See Instructions) <i>Resilient Infrastructure Solutions</i>

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
5/12/24	LAN PAC	500
6 Contributor address; City; State; Zip Code		
2925 Briarpark Dr. Houston TX 77042		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
5/1/24	Rahul Guduru	5000
Contributor address; City; State; Zip Code		
2900 Rolido Dr. Houston TX 77063 # 126		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Project Manager		Anlarr Construction
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
4/9/24	Atri Sen	501
Contributor address; City; State; Zip Code		
27823 Desert Manor Dr. Katy TX 77494		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Founder		Resilience Infrastructure Solutions
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
3/7/24	Hannah Herick	10
Contributor address; City; State; Zip Code		
408 W. 17th St. Odessa TX 79761		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Communication Coordinator		Crisis leader of West Texas

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcia Simmons</i>	7 Amount of contribution (\$)  <i>25</i>
<i>4/20/24</i>	6 Contributor address; City; State; Zip Code <i>3624 S. Hills Ave. Fort Worth TX 76109</i>	
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Retired</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bharatha Kumar</i>	Amount of contribution (\$)  <i>10</i>
<i>4/20/24</i>	Contributor address; City; State; Zip Code <i>1900 Burton Dr. 219 Austin TX 78741</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nedra Oyen</i>	Amount of contribution (\$)  <i>5</i>
<i>4/18/24</i>	Contributor address; City; State; Zip Code <i>744 Brooks St. 4306 Sugarland TX 77478</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Koger</i>	Amount of contribution (\$)  <i>10</i>
<i>4/13/24</i>	Contributor address; City; State; Zip Code <i>6323 Carnaby Ln. Rosenberg TX 77471</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Koger</i>	7 Amount of contribution (\$)  <i>10</i>
<i>6/13/24</i>	6 Contributor address; City; State; Zip Code <i>6323 Carnaby Ln. Rosenberg TX 77471</i>	
8 Principal occupation / Job title (See Instructions) <del>Director</del> <i>Not</i>		9 Employer (See Instructions) <i>employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Gaurav Jhaveri</i>	Amount of contribution (\$)  <i>100</i>
<i>6/12/24</i>	Contributor address; City; State; Zip Code <i>7027 Argonne Trl. Sugarland TX 77479</i>	
Principal occupation / Job title (See Instructions) <i>Director</i>		Employer (See Instructions) <i>Siemens</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donna Ellis</i>	Amount of contribution (\$)  <i>25</i>
<i>6/12/24</i>	Contributor address; City; State; Zip Code <i>13810 Placid Woods Ct. Sugarland TX 77488</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chetan Dave</i>	Amount of contribution (\$)  <i>25</i>
<i>6/12/24</i>	Contributor address; City; State; Zip Code <i>30 Sierra Oaks Dr. Sugarland TX 77479</i>	
Principal occupation / Job title (See Instructions) <i>Investment Manager</i>		Employer (See Instructions) <i>SELF</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chandrabant Patel</i>	7 Amount of contribution (\$)
<i>6/12/24</i>	6 Contributor address; City; State; Zip Code <i>355 N. Post Oak Ln Houston TX 77024</i>	<i>100</i>
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Manrithi Devarakonda</i>	Amount of contribution (\$)
<i>6/12/24</i>	Contributor address; City; State; Zip Code <i>3315 Reston Landing Dr Katy TX 77494</i>	<i>250</i>
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>GE</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Namita Asthana</i>	Amount of contribution (\$)
<i>6/12/24</i>	Contributor address; City; State; Zip Code <i>4418 Castewood St. Sugarland TX 77479</i>	<i>25</i>
Principal occupation / Job title (See Instructions) <i>Auth</i>		Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Slack Haleem</i>	Amount of contribution (\$)
<i>6/12/24</i>	Contributor address; City; State; Zip Code <i>7514 San Clemente Pl Ct. Katy TX 77494</i>	<i>50</i>
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dinishi Abayarathna</i>	7 Amount of contribution (\$) <i>50</i>
<i>6/11/24</i>	6 Contributor address; City; State; Zip Code <i>4427 Pine Landing Dr. Missami City Tx 77434</i>	
8 Principal occupation / Job title (See Instructions) <i>Consultant</i>		9 Employer (See Instructions) <i>PG</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Naushad Ramoly</i>	Amount of contribution (\$) <i>100</i>
<i>6/11/24</i>	Contributor address; City; State; Zip Code <i>1227 Ancrum Hill Ln. Sugarland Tx 77479</i>	
Principal occupation / Job title (See Instructions) <i>Executive Coach</i>		Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tanya Stomking</i>	Amount of contribution (\$) <i>100</i>
<i>6/10/24</i>	Contributor address; City; State; Zip Code <i>13111 Fieldgate Dr. Austin TX 78753</i>	
Principal occupation / Job title (See Instructions) <i>Marketing Director</i>		Employer (See Instructions) <i>HBA of Greater Austin</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sharat Kalasa</i>	Amount of contribution (\$) <i>5000</i>
<i>5/10/24</i>	Contributor address; City; State; Zip Code <i>10 Elliott Way Sugarland TX 77479</i>	
Principal occupation / Job title (See Instructions) <i>Director of Operations</i>		Employer (See Instructions) <i>Civitas</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kimberly Romero</i>	7 Amount of contribution (\$)  <i>75</i>
<i>6/7/24</i>	6 Contributor address; City; State; Zip Code <i>4603 Avenue C Austin TX 78751</i>	
8 Principal occupation / Job title (See Instructions) <i>Operations Manager</i>		9 Employer (See Instructions) <i>Kirk Watson Campaign</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Davesh Mody</i>	Amount of contribution (\$)  <del>25</del> <i>50</i>
<i>6/7/24</i>	Contributor address; City; State; Zip Code <i>4515 Tamarind Trl. Kingwood TX 77345</i>	
Principal occupation / Job title (See Instructions) <i>Civil Engineer</i>		Employer (See Instructions) <i>Parsons</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcia Simmons</i>	Amount of contribution (\$)  <i>25</i>
<i>6/7/24</i>	Contributor address; City; State; Zip Code <i>3624 South Hills Ave Ft Worth TX 76109</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Justin Perez</i>	Amount of contribution (\$)  <del>100</del> <i>100</i>
<i>6/5/24</i>	Contributor address; City; State; Zip Code <i>4401 Vaughn St. #C Austin TX 78723</i>	
Principal occupation / Job title (See Instructions) <i>Director</i>		Employer (See Instructions) <i>Future Now</i>

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kiefer Odell</i>	7 Amount of contribution (\$) <i>100</i>
	6 Contributor address; City; State; Zip Code <i>460 Bastrop Hwy #220 Austin TX 78741</i>	
8 Principal occupation / Job title (See Instructions) <i>Legislative Liaison</i>		9 Employer (See Instructions) <i>TXDOT</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Celia Israel</i>	Amount of contribution (\$) <i>250</i>
	Contributor address; City; State; Zip Code <i>8708 S. Congress Ave #500 Austin TX 78748</i>	
Principal occupation / Job title (See Instructions) <i>Painter</i>		Employer (See Instructions) <i>SELF</i>
Date	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael Baker International PAC</i>	Amount of contribution (\$) <i>500</i>
	Contributor address; City; State; Zip Code <i>500 Grant St. #5400 Pittsburgh PA 15219</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cassie Fitzgerald</i>	Amount of contribution (\$) <i>100</i>
	Contributor address; City; State; Zip Code <i>1007 E. 49th St. Austin TX 78751</i>	
Principal occupation / Job title (See Instructions) <i>Student</i>		Employer (See Instructions) <i>None</i>

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If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rashed Islam</i>	7 Amount of contribution (\$)  <i>250</i>
<i>6/4/24</i>	6 Contributor address; City; State; Zip Code <i>11901 Palisades Parkway Austin TX 78732</i>	
8 Principal occupation / Job title (See Instructions) <i>Engineer</i>		9 Employer (See Instructions) <i>HD12</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Joe Deshotel</i>	Amount of contribution (\$)  <i>150</i>
<i>6/4/24</i>	Contributor address; City; State; Zip Code <i>1801 Alexander Ave #4101 Austin TX 78702</i>	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>BO-P Strategies</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Frank Yeverino</i>	Amount of contribution (\$)  <i>2500</i>
<i>5/10/24</i>	Contributor address; City; State; Zip Code <i>1119 Oak Creek Dr. Richmond TX 77469</i>	
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andy Brown Campaign</i>	Amount of contribution (\$)  <i>250</i>
<i>6/4/24</i>	Contributor address; City; State; Zip Code <i>PO Box 6061 Austin TX 78762</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hannah Horvath</i>	7 Amount of contribution (\$)
<i>6/4/24</i>	6 Contributor address; City; State; Zip Code <i>260 Old State Hwy 296 Georgetown TX 78626</i>	<i>100</i>
8 Principal occupation / Job title (See Instructions) <i>Communications Coordinator</i>		9 Employer (See Instructions) <i>Crisis Center of West Texas</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mallory Hart</i>	Amount of contribution (\$)
<i>6/14/24</i>	Contributor address; City; State; Zip Code <i>6706 Tulane Dr. Austin TX 78723</i>	<i>25</i>
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Hart Matters</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andre Twicker</i>	Amount of contribution (\$)
<i>6/3/24</i>	Contributor address; City; State; Zip Code <i>13604 Bauhaus Blvd Austin TX 78660</i>	<i>50</i>
Principal occupation / Job title (See Instructions) <i>Communications Director</i>		Employer (See Instructions) <i>City of Austin</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charley Mills</i>	Amount of contribution (\$)
<i>6/3/24</i>	Contributor address; City; State; Zip Code <i>4823 39th Pl #1 Sunnyside NY 11104</i>	<i>25</i>
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Telfry John</i>	7 Amount of contribution (\$)
<i>5/10/24</i>	6 Contributor address; City; State; Zip Code <i>15430 Woodland Orchard Cypress Ln. TX 77433</i>	<i>1000</i>
8 Principal occupation / Job title (See Instructions) <i>President</i>		9 Employer (See Instructions) <i>Geoscience Engineering</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ahmed Valdez</i>	Amount of contribution (\$)
<i>5/15/24</i>	Contributor address; City; State; Zip Code <i>15310 Skyhill Dr. Cypress TX 77433</i>	<i>500</i>
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>AKV</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ali Roshanfekr</i>	Amount of contribution (\$)
<i>3/16/24</i>	Contributor address; City; State; Zip Code <i>14218 Woodloch Dr Houston TX 77077</i>	<i>1000</i>
Principal occupation / Job title (See Instructions) <i>Senior Engineer</i>		Employer (See Instructions) <i>Cascade Civil Services</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Amitdyuti Jengupta</i>	Amount of contribution (\$)
<i>5/11/24</i>	Contributor address; City; State; Zip Code <i>4512 Page Dr. Metairie LA <del>70003</del> 70003</i>	<i>500</i>
Principal occupation / Job title (See Instructions) <i>VP - Texas Water</i>		Employer (See Instructions) <i>Parsons</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date 6/11/24	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joelynn Clouser Campaign Account	7 Amount of contribution (\$) 50
6 Contributor address; City; State; Zip Code 3006 Saddle Ct. Missouri City TX 77407		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

Date 5/28/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nick Dhanani	Amount of contribution (\$) 1000
Contributor address; City; State; Zip Code 11333 Fountain Lake Dr. Stafford TX 77477		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) DPEG

Date 5/28/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jvanita Shihadeh	Amount of contribution (\$) 2000
Contributor address; City; State; Zip Code 11907 Arcadia Bend Ln. Houston TX 77041		
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Earth Engineering

Date 5/21/24	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthew Zeve	Amount of contribution (\$) 2000
Contributor address; City; State; Zip Code 907 Nicholson St. Houston TX 77006		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Gauge Engineering

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hannah Horvath</i>	7 Amount of contribution (\$)  <i>10</i>
<i>6/3/24</i>	6 Contributor address; City; State; Zip Code <i>408 W. 17th St. Odessa TX 79761</i>	
8 Principal occupation / Job title (See Instructions) <i>Communications Coordinator</i>		9 Employer (See Instructions) <i>Crisis Center of West Texas</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donna Ellis</i>	Amount of contribution (\$)  <i>25</i>
<i>6/11/24</i>	Contributor address; City; State; Zip Code <i>13810 Placid Woods Ct. Sugarland TX 77498</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Kimberly Romero</i>	Amount of contribution (\$)  <i>100</i>
<i>5/30/24</i>	Contributor address; City; State; Zip Code <i>17801 Griglio Way Pflugerville TX 78660</i>	
Principal occupation / Job title (See Instructions) <i>Operations Director Manager</i>		Employer (See Instructions) <i>Kirk Watson Campaign</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rita Okay</i>	Amount of contribution (\$)  <i>25</i>
<i>5/30/24</i>	Contributor address; City; State; Zip Code <i>2414 Grove View Trl. Fresno, TX</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Adrian Garcia</i>	7 Amount of contribution (\$) <i>5000</i>
<i>5/29/24</i>	6 Contributor address; City; State; Zip Code <i>PO Box 30066 Houston TX 77249</i>	
8 Principal occupation / Job title (See Instructions) <i>County Commissioner</i>		9 Employer (See Instructions) <i>Harris County</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>James Rice</i>	Amount of contribution (\$) <i>250</i>
<i>5/24/24</i>	Contributor address; City; State; Zip Code <i>5402 Oban Terrace Sugar Land TX 77479</i>	
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>Rice + Gardner Consultants</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jay Aiger</i>	Amount of contribution (\$) <i>500</i>
<i>5/24/24</i>	Contributor address; City; State; Zip Code <i>5414 Aspen St. Houston TX 77081</i>	
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Harris County</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rachel Osterloh</i>	Amount of contribution (\$) <i>25</i>
<i>5/24/24</i>	Contributor address; City; State; Zip Code <i>404 Rio Grande St Apt 202 Austin TX 78701</i>	
Principal occupation / Job title (See Instructions) <i>Director</i>		Employer (See Instructions) <i>UTMB</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>5/22/24</i> <i>Donna Ellis</i>	7 Amount of contribution (\$) <i>1000</i>
	6 Contributor address; City; State; Zip Code <i>13410 Placid Woods Ct. Sugar Land TX 77498</i>	
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>5/22/24</i> <i>Nicole Merritt</i>	Amount of contribution (\$) <i>50</i>
	Contributor address; City; State; Zip Code <i>607 Vermont Rd. Austin TX 78702</i>	
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>5/3/24</i> <i>Kevin Matocha</i>	Amount of contribution (\$) <i>1500</i>
	Contributor address; City; State; Zip Code <i>1600 Hwy 6 S #205 Sugar Land TX 77478</i>	
Principal occupation / Job title (See Instructions) <i>CEO</i>		Employer (See Instructions) <i>Stonehenge Companies</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>5/22/24</i> <i>Jesús Sosa</i>	Amount of contribution (\$) <i>500</i>
	Contributor address; City; State; Zip Code <i>11111 Katy Fwy Ste 910 Houston TX 77079</i>	
Principal occupation / Job title (See Instructions) <i>Surgeon</i>		Employer (See Instructions) <i>Solar Surgically</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mark Cowen</i>	7 Amount of contribution (\$) <i>250</i>
<i>5/22/24</i>	6 Contributor address; City; State; Zip Code <i>5829 W. Sam Houston Pkwy N. Ste 1201 Houston TX 77041</i>	
8 Principal occupation / Job title (See Instructions) <i>Healthcare</i>		9 Employer (See Instructions) <i>Angel Medical</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mark McCulloch</i>	Amount of contribution (\$) <i>100</i>
<i>5/22/24</i>	Contributor address; City; State; Zip Code <i>3217 N. IH 35 Austin TX 78722</i>	
Principal occupation / Job title (See Instructions) <i>Graphic Designer</i>		Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alia Vinson</i>	Amount of contribution (\$) <i>500</i>
<i>5/22/24</i>	Contributor address; City; State; Zip Code <i>2420 Locke Ln Houston TX 77019</i>	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>ABCR</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Asim Tufail</i>	Amount of contribution (\$) <i>2500</i>
<i>5/21/24</i>	Contributor address; City; State; Zip Code <i>5447 Larkin Houston TX 77007</i>	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Blackline Engineering</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Roland Garcia</i>	7 Amount of contribution (\$)  <i>1000</i>
<i>5/21/24</i>	6 Contributor address; City; State; Zip Code <i>46 E. Rivercrest Dr. Houston Tx 77042</i>	
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) <i>Greerberg Travigy, LLP</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Randy Randemann</i>	Amount of contribution (\$)  <i>1000</i>
<i>5/21/24</i>	Contributor address; City; State; Zip Code <i>4860 James Lane Fulshear Tx 77441</i>	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>BGE</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ryan Zehl</i>	Amount of contribution (\$)  <i>1500</i>
<i>5/21/24</i>	Contributor address; City; State; Zip Code <i>8820 Chatsworth Dr. Houston Tx 77024</i>	
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Zehl + Associates</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Catherine Bratvedt</i>	Amount of contribution (\$)  <i>30</i>
<i>5/21/24</i>	Contributor address; City; State; Zip Code <i>17430 Aberdeenshire Dr. Richmond TX 77407</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Troy Chandler</i>	7 Amount of contribution (\$)
<i>5/20/24</i>	6 Contributor address; City; State; Zip Code <i>4152 Tennyson St. Houston TX 77005</i>	<i>1000</i>
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) <i>Chandler McNulty</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Christin Chandler</i>	Amount of contribution (\$)
<i>5/20/24</i>	Contributor address; City; State; Zip Code <i>4152 Tennyson St. Houston TX 77005</i>	<i>500</i>
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>Stratos Title</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Emily Anderson</i>	Amount of contribution (\$)
<i>5/21/24</i>	Contributor address; City; State; Zip Code <i>4807 Pin Oak Pl #3311 Houston TX 77081</i>	<i>250</i>
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Hart &amp; Associates</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Michael Maksoud</i>	Amount of contribution (\$)
<i>5/20/24</i>	Contributor address; City; State; Zip Code <i>7510 Holly Ct. Estate Houston TX <del>77098</del> 77095</i>	<i>250</i>
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <del>DEC</del> <i>DEC</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcia Simmons</i>	7 Amount of contribution (\$) <i>25</i>
<i>5/20/24</i>	6 Contributor address; City; State; Zip Code <i>3624 South Hills Ave Fort Worth TX 76108</i>	
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bharath Kumar</i>	Amount of contribution (\$) <i>10</i>
<i>5/20/24</i>	Contributor address; City; State; Zip Code <i>1900 Barton Pr. 219 Austin TX 78741</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nedra Oyea</i>	Amount of contribution (\$) <i>5</i>
<i>5/19/24</i>	Contributor address; City; State; Zip Code <i>700 Brooks St. #4306 Syovdand TX 77478</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Andy Brown</i>	Amount of contribution (\$) <i>250</i>
<i>5/15/24</i>	Contributor address; City; State; Zip Code <i>PO Box 6061 Austin TX 78762</i>	
Principal occupation / Job title (See Instructions) <i>Lawyer</i>		Employer (See Instructions) <i>Andy Brown + Associates PLLC</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sarah Goodfriend</i>	7 Amount of contribution (\$)
<i>5/18/24</i>	6 Contributor address; City; State; Zip Code <i>1500 W. 24th St. Austin TX 78703</i>	<i>50</i>
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Virginia Agnew</i>	Amount of contribution (\$)
<i>5/18/24</i>	Contributor address; City; State; Zip Code <i>1204 Castle Hill St. Austin TX 78703</i>	<i>100</i>
Principal occupation / Job title (See Instructions) <i>Attorneys</i>		Employer (See Instructions) <i>Herring &amp; Irwin, LLP</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Atul Kothari</i>	Amount of contribution (\$)
<i>5/16/24</i>	Contributor address; City; State; Zip Code <i>4526 Bermuda Pr. Sugar Land TX 77479</i>	<i>1000</i>
Principal occupation / Job title (See Instructions) <i>CPA</i>		Employer (See Instructions) <i>Kothari CPA PC</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lee Luper</i>	Amount of contribution (\$)
<i>5/16/24</i>	Contributor address; City; State; Zip Code <i>5421 Brystone Dr. Houston TX 77041</i>	<i>2500</i>
Principal occupation / Job title (See Instructions) <i>Professional Land Surgeon</i>		Employer (See Instructions) <i>Luper LLC</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Chaochiung Lee</i>	7 Amount of contribution (\$)  <i>1000</i>
<i>5/15/24</i>	6 Contributor address; City; State; Zip Code <i>6001 Savoy Dr #100 Houston TX 77036</i>	
8 Principal occupation / Job title (See Instructions) <i>Architect</i>		9 Employer (See Instructions) <i>STOA</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charles Wilkinson</i>	Amount of contribution (\$)  <i>250</i>
<i>5/15/24</i>	Contributor address; City; State; Zip Code <i>2306 Wickersham Ln. #1218 Austin TX 78741</i>	
Principal occupation / Job title (See Instructions) <i>Chief of Staff</i>		Employer (See Instructions) <i>Texas House of Representatives</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>David Koyer</i>	Amount of contribution (\$)  <i>10</i>
<i>5/13/24</i>	Contributor address; City; State; Zip Code <i>6323 Carnaby Ln. Rosenberg TX 77471</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Arund Chaudhary</i>	Amount of contribution (\$)  <i>50</i>
<i>5/13/24</i>	Contributor address; City; State; Zip Code <i>22214 N. Lake Village Dr. Katy TX 77450</i>	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Deloitte</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Avinash Thadhani</i>	7 Amount of contribution (\$)  <i>250</i>
<i>5/11/24</i>	6 Contributor address; City; State; Zip Code <i>1151 Mvscockline Hollow Ln. Richmond TX 77406</i>	
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Uinod Shakh</i>	Amount of contribution (\$)  <i>250</i>
<i>5/11/24</i>	Contributor address; City; State; Zip Code <i>6200 Savoy Dr. #550 Houston TX 77036</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ana Hernandez</i>	Amount of contribution (\$)  <i>250</i>
<i>5/11/24</i>	Contributor address; City; State; Zip Code <i>PO Box 1287 Houston TX 77251</i>	
Principal occupation / Job title (See Instructions) <i>State Representative</i>		Employer (See Instructions) <i>State Representative</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sergio Cavazos</i>	Amount of contribution (\$)  <i>250</i>
<i>5/19/24</i>	Contributor address; City; State; Zip Code <i>6136 Florencia Ln Austin TX 78724</i>	
Principal occupation / Job title (See Instructions) <i>Associate Attorney</i>		Employer (See Instructions) <i>Greerberg Traurig LLP</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
6/20/24	Marcia Simmons 6 Contributor address; City; State; Zip Code 3624 S. Hills Ave. Fort Worth TX 76109	25
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Not employed		Not employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
6/20/24	Bharath Kumar Contributor address; City; State; Zip Code 1800 Burton Dr. #218 Austin TX 78741	10
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Not employed		Not employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
6/13/24	Anand Chevkhari Contributor address; City; State; Zip Code 22214 N. Lake Village Dr. Katy TX 77450	50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Consultant		Deloitte
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
5/15/24	Cobb Feudley PAC Contributor address; City; State; Zip Code 4429 W. Sam Houston Pkwy #600 Houston TX 77041	2500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Not applicable		Not applicable

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Yaman Desai</i>	7 Amount of contribution (\$) <i>250</i>
<i>5/9/24</i>	6 Contributor address; City; State; Zip Code <i>2660 N. Haskell Ave Apt 2105 Dallas TX 75204</i>	
8 Principal occupation / Job title (See Instructions) <i>Lawyer</i>		9 Employer (See Instructions) <i>Baker Botts LLP</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Erik Anciaux</i>	Amount of contribution (\$) <i>100</i>
<i>5/7/24</i>	Contributor address; City; State; Zip Code <i>360 S. Market St #708 San Jose CA 95113</i>	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Basic Solutions</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bailey Schumm</i>	Amount of contribution (\$) <i>250</i>
<i>5/07/24</i>	Contributor address; City; State; Zip Code <i>1711 Perez St. Austin TX 78721</i>	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Secker Strategies</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Theresa Pruston-Werner</i>	Amount of contribution (\$) <i>1000</i>
<i>5/7/24</i>	Contributor address; City; State; Zip Code <i>325 Upper Toyon Dr. Ross CA 94957</i>	
Principal occupation / Job title (See Instructions) <i>Anthropologist</i>		Employer (See Instructions) <i>128 Collective Foundation</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Devesh Mody</i>	7 Amount of contribution (\$)  <i>50</i>
<i>5/7/24</i>	6 Contributor address; City; State; Zip Code <i>4515 Tamarind Trail Kingwood TX 77345</i>	
8 Principal occupation / Job title (See Instructions) <i>Civil Engineer</i>		9 Employer (See Instructions) <i>Parsons</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcia Simmons</i>	Amount of contribution (\$)  <i>25</i>
<i>5/7/24</i>	Contributor address; City; State; Zip Code <i>3624 S. Hills Ave. Fort Worth TX 76109</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Alexander Hunt</i>	Amount of contribution (\$)  <i>250</i>
<i>5/5/24</i>	Contributor address; City; State; Zip Code <i>28935 Grand Tebn Ct Katy TX 77494</i>	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Hunt law firm</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jacob Smith</i>	Amount of contribution (\$)  <i>500</i>
<i>5/5/24</i>	Contributor address; City; State; Zip Code <i>4412 Merle Dr. Austin TX 78745</i>	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Longleaf Consulting</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Stephen Crimi</i>	7 Amount of contribution (\$) <i>50</i>
<i>5/13/24</i>	6 Contributor address; City; State; Zip Code <i>2024 Sawyer Heights # 374 Houston TX 77007</i>	
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charley Mills</i>	Amount of contribution (\$) <i>25</i>
<i>5/13/24</i>	Contributor address; City; State; Zip Code <i>4823 39th Pl #1 Sunnyvale NY 11104</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Girish Venkat</i>	Amount of contribution (\$) <i>250</i>
<i>5/12/24</i>	Contributor address; City; State; Zip Code <i>4611 Lake Knoll Ct. Sugar Land TX 77499</i>	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donna Ellis</i>	Amount of contribution (\$) <i>25</i>
<i>5/11/24</i>	Contributor address; City; State; Zip Code <i>13410 Placid Woods Ct. Sugar Land TX 77498</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rita Obey</i>	7 Amount of contribution (\$)  <i>25</i>
<i>4/30/24</i>	6 Contributor address; City; State; Zip Code <i>2414 Crown View Trl Fresno TX 77545</i>	
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lindsay Munoz</i>	Amount of contribution (\$)  <i>500</i>
<i>4/28/24</i>	Contributor address; City; State; Zip Code <i>4234 Whitman St. Houston TX 77027</i>	
Principal occupation / Job title (See Instructions) <i>Consulting</i>		Employer (See Instructions) <i>Whitman + Munoz LLC</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rachel Osterloh</i>	Amount of contribution (\$)  <i>25</i>
<i>4/24/24</i>	Contributor address; City; State; Zip Code <i>404 Rio Grande St. # 202 Austin TX 78701</i>	
Principal occupation / Job title (See Instructions) <i>Director</i>		Employer (See Instructions) <i>UTMB</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Catherine Bratton</i>	Amount of contribution (\$)  <i>30</i>
<i>4/21/24</i>	Contributor address; City; State; Zip Code <i>17430 Aberdeenshire Dr Richmond TX 77407</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
6/30/24	Rita Obey 6 Contributor address; City; State; Zip Code 2414 Grove View Trail Fresno TX 77545	25
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Not employed		Not employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
6/24/24	Rachel Osterloh Contributor address; City; State; Zip Code 404 Biograde St #202 Austin TX 78701	25
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Director		UTMB
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
5/28/24	Santiago Castaneda Contributor address; City; State; Zip Code 2426 Mills Creek Dr Kingwood TX 77339	20,000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
CEO & President		Omega Engineers
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
6/21/24	Catherine Bratvedt Contributor address; City; State; Zip Code 17430 Aberdeshire Pr. Richmond TX 77407	30
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<del>Not employed</del> Not employed		<del>Not employed</del> Not employed

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Anand Choudhary</i>	7 Amount of contribution (\$) <i>50</i>
<i>4/13/24</i>	6 Contributor address; City; State; Zip Code <i>22214 N. Lake Village Pr. Katy TX 77450</i>	
8 Principal occupation / Job title (See Instructions) <i>Consultant</i>		9 Employer (See Instructions) <i>Deloitte</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Divesh Mody</i>	Amount of contribution (\$) <i>50</i>
<i>4/7/24</i>	Contributor address; City; State; Zip Code <i>4515 Tamarind Trl. Kingwood TX 77345</i>	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Parsons</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Marcia Simmons</i>	Amount of contribution (\$) <i>25</i>
<i>4/7/24</i>	Contributor address; City; State; Zip Code <i>3024 S. Hill's Ave. Fort Worth TX 76109</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charly Mills</i>	Amount of contribution (\$) <i>25</i>
<i>4/13/24</i>	Contributor address; City; State; Zip Code <i>4623 34th Pl #1 Sausyside NY 11104</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hannah Horick</i>	7 Amount of contribution (\$)  <i>10</i>
<i>4/13/24</i>	6 Contributor address; City; State; Zip Code <i>408 W. 17th St Odessa TX 79761</i>	
8 Principal occupation / Job title (See Instructions) <i>Communications Coordinator</i>		9 Employer (See Instructions) <i>Crisis Center of West Texas</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donna Ellis</i>	Amount of contribution (\$)  <i>25</i>
<i>4/1/24</i>	Contributor address; City; State; Zip Code <i>13910 Pined Woods Ct. Sugar Land TX 77498</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rita Obey</i>	Amount of contribution (\$)  <i>25</i>
<i>3/13/24</i>	Contributor address; City; State; Zip Code <i>2411 Grove View Trl. Fresno TX 77545</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Omar Alhanmourri</i>	Amount of contribution (\$)  <i>5000</i>
<i>3/29/24</i>	Contributor address; City; State; Zip Code <i>8757 Katy Hwy # 1912 Houston TX 77024</i>	
Principal occupation / Job title (See Instructions) <i>Owner</i>		Employer (See Instructions) <i>Montana Pavement Group LLC</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
3/24/24	Rachel Osterloh 6 Contributor address; City; State; Zip Code 404 Rio Grande St Austin TX 78701 #202	25
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Director		UTMB
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
3/21/24	Birdie Kelley Contributor address; City; State; Zip Code 7631 S. Glen Willow Ln Missouri TX 77089 City	40
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Community Liason		Borris Miles
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
3/20/24	William Bobrick Contributor address; City; State; Zip Code PO Box 637 Seymour TX 77498	50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Organizer		AFT of Texas
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
3/20/24	Marcia Simmons Contributor address; City; State; Zip Code 3624 S. Hills Ave. Fort Worth TX 76109	25
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Not employed		Not employed

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Fort Bend United PAC</i>	7 Amount of contribution (\$) <i>8000</i>
<i>5/10/24</i>	6 Contributor address; City; State; Zip Code <i>PO Box 420811 Houston TX 77242</i>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Glen Maxey</i>	Amount of contribution (\$) <i>500</i>
<i>6/4/24</i>	Contributor address; City; State; Zip Code <i>5200 Guadalupe St. Austin TX 78751</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jaime Villaverde</i>	Amount of contribution (\$) <i>100</i>
<i>6/4/24</i>	Contributor address; City; State; Zip Code <i>105 W. 51st St. Austin TX 78751</i>	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Tx Senate</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Anthony Anthony Pusch</i>	Amount of contribution (\$) <i>2500</i>
<i>5/10/24</i>	Contributor address; City; State; Zip Code <i>6330 Gulf Fwy Houston TX 77023</i>	
Principal occupation / Job title (See Instructions) <i>Co Founder</i>		Employer (See Instructions) <i>Pusch + Nguyen Law Firm</i>

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# MONETARY POLITICAL CONTRIBUTIONS

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
3/20/24	Dharath Kumar 6 Contributor address; City; State; Zip Code 1900 Burton Dr #219 Austin TX 78741	<del>5</del> 10
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Not employed		Not employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
3/19/24	Vladimir Hidrovo-Alban Contributor address; City; State; Zip Code 2218 Granite Park Lane Richmond TX 77469	50
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Staff		Fort Bend County
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
3/18/24	Nedra Oyen Contributor address; City; State; Zip Code 744 Brooks St. #4306 Sugar Land TX 77478	5
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Not employed		Not employed
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
3/19/24	Rachel Zummo Contributor address; City; State; Zip Code 403 W. 38th St. 205 Austin TX 78705	5
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Attorney		Texas RioGrande Legal Aid

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# SCHEDULE A1

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2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mike Talabi</i>	7 Amount of contribution (\$) <i>2500</i>
	6 Contributor address; City; State; Zip Code <i>5353 W. Alabama St. Houston TX 77056</i>	
8 Principal occupation / Job title (See Instructions) <i>Managing Attorney</i>		9 Employer (See Instructions) <i>Talabi + Associates PC</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Susana Blausen</i>	Amount of contribution (\$) <i>100</i>
	Contributor address; City; State; Zip Code <i>28930 Grand Teton Ct. Katy TX 77494</i>	
Principal occupation / Job title (See Instructions) <i>Client Services Manager</i>		Employer (See Instructions) <i>Brown + Caldwell</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hemachandra Kolluvu</i>	Amount of contribution (\$) <i>2500</i>
	Contributor address; City; State; Zip Code <i>84 Heatherow Ln. Sugar Land TX 77479</i>	
Principal occupation / Job title (See Instructions) <i>Founder</i>		Employer (See Instructions) <i>Amani Engineering</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Smil Kommeneni</i>	Amount of contribution (\$) <i>1000</i>
	Contributor address; City; State; Zip Code <i>2210 Coral Cove Dr. Pearland TX 77584</i>	
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>Cintas</i>

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

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donna Ellis</i>	7 Amount of contribution (\$) <i>50</i>
<i>2/27/24</i>	6 Contributor address; City; State; Zip Code <i>13410 Placid Woods Ct. Sugar Land TX 77498</i>	
8 Principal occupation / Job title (See Instructions) <i>Not employed</i>		9 Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bhuvanesh Bhatt</i>	Amount of contribution (\$) <i>25</i>
<i>2/26/24</i>	Contributor address; City; State; Zip Code <i>401 Santos St. # 3101 San Antonio TX 78210</i>	
Principal occupation / Job title (See Instructions) <i>Software Developer</i>		Employer (See Instructions) <i>Wolfram Research</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Susan Hays</i>	Amount of contribution (\$) <i>250</i>
<i>2/26/24</i>	Contributor address; City; State; Zip Code <i>PO Box 41647 Austin TX 78704</i>	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Francisco Sanchez</i>	Amount of contribution (\$) <i>1000</i>
<i>2/26/24</i>	Contributor address; City; State; Zip Code <i>1860 White Oak Dr. # 208 Houston TX 77009</i>	
Principal occupation / Job title (See Instructions) <i>Executive</i>		Employer (See Instructions) <i>SBA</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1:
2 FILER NAME		3 Filer ID (Ethics Commission Filers)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hudson Conway</i>	7 Amount of contribution (\$) <i>100</i>
	6 Contributor address; City; State; Zip Code <i>4015 Brynmawr Dr. Richmond TX 77406</i>	
8 Principal occupation / Job title (See Instructions) <i>Farmer</i>		9 Employer (See Instructions) <i>Self</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Sergio Cavazos</i>	Amount of contribution (\$) <i>250</i>
	Contributor address; City; State; Zip Code <i>6136 Florenzanu Acton TX 78724</i>	
Principal occupation / Job title (See Instructions) <i>Associate Attorney</i>		Employer (See Instructions) <i>Creeberg Travy LLP</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Hannah Horick</i>	Amount of contribution (\$) <i>10</i>
	Contributor address; City; State; Zip Code <i>408 W. 17th St. Odessa TX 79761</i>	
Principal occupation / Job title (See Instructions) <i>Communications Coordinator</i>		Employer (See Instructions) <i>Crisis Center of West Texas</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Charles Mills</i>	Amount of contribution (\$) <i>25</i>
	Contributor address; City; State; Zip Code <i>4823 30th Pl #1 Sunnyside NY 11104</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of contribution (\$)
4/20/24	Debabrata Nandi 6 Contributor address; City; State; Zip Code 12516 Boulder Ck Dr. Pearland TX 77584	500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
CEO		Brown Real Estate
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
5/13/24	Rahmet Mohamed Contributor address; City; State; Zip Code 2219 Hermina Radler Dr. Richmond TX 77469	2500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Director of Strategy		United Engineers
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
5/14/24	Fort Bend United PAC Contributor address; City; State; Zip Code PO Box 42081 Houston TX 77242	10,000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
5/18/24	Aliamed Valdez Contributor address; City; State; Zip Code 15310 Sayhill Dr. Cypress TX 77433	500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
President		AKV

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Castro for Congress</i>	7 Amount of contribution (\$) <i>500</i>
<i>3/1/24</i>	6 Contributor address; City; State; Zip Code <i>PO Box 544 San Antonio TX 78292</i>	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Steven Paletz</i>	Amount of contribution (\$) <i>50</i>
<i>3/1/24</i>	Contributor address; City; State; Zip Code <i>14707 Polo Pt. Del Mar CA 92014</i>	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Akerman</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Donna Ellis</i>	Amount of contribution (\$) <i>25</i>
<i>3/1/24</i>	Contributor address; City; State; Zip Code <i>13910 Placid Woods Ct. Sugarland TX 77498</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Rita Oberg</i>	Amount of contribution (\$) <i>25</i>
<i>2/29/24</i>	Contributor address; City; State; Zip Code <i>2414 Grove View Trl. Fresno TX 77545</i>	
Principal occupation / Job title (See Instructions) <i>Not employed</i>		Employer (See Instructions) <i>Not employed</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Mahindra Rodrigo</i>	7 Amount of contribution (\$) <i>\$1500</i>
<i>6/11/24</i>	6 Contributor address; City; State; Zip Code <i>15514 Turtle Oak Ct. Houston TX 77059</i>	
8 Principal occupation / Job title (See Instructions) <i>Principal</i>		9 Employer (See Instructions) <i>GC Engineering</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Elmer Mejia</i>	Amount of contribution (\$) <i>1000</i>
<i>6/11/24</i>	Contributor address; City; State; Zip Code <i>9711 S Mason Rd Richmond TX 77407</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Nkemdi Okateke</i>	Amount of contribution (\$) <i>500</i>
<i>6/11/24</i>	Contributor address; City; State; Zip Code <i>6464 Savoy Dr #610 Houston TX 77036</i>	
Principal occupation / Job title (See Instructions) <i>P.E.</i>		Employer (See Instructions) <i>Nedu Engineering Services</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Tariq Zaka</i>	Amount of contribution (\$) <i>150</i>
<i>6/11/24</i>	Contributor address; City; State; Zip Code <i>11218 Balmuño Ct. Richmond TX 77407</i>	
Principal occupation / Job title (See Instructions) <i>President</i>		Employer (See Instructions) <i>Luxor Builders</i>

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Huey Ray Fischer Garcia</i>	7 Amount of contribution (\$)  <i>50</i>
	6 Contributor address; City; State; Zip Code <i>1027 Dauphine St. New Orleans LA 70116</i>	
8 Principal occupation / Job title (See Instructions) <i>Attorney</i>		9 Employer (See Instructions) <i>Southern Poverty Law Center</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Dewsh Mody</i>	Amount of contribution (\$)  <i>25</i>
	Contributor address; City; State; Zip Code <i>28527 Jade Springs Ln Fulshear TX 77044</i>	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Parsans</i>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Everytown for Gun Safety Action Fund</i>	Amount of contribution (\$)  <i>500</i>
	Contributor address; City; State; Zip Code <i>PO Box 3886 New York NY 10163</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Indian American Impact Fund</i>	Amount of contribution (\$)  <i>3000</i>
	Contributor address; City; State; Zip Code <i>444 S. Capitol St. SW Ste 407 Washington DC 20003</i>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A1

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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)
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>2/25/21</i> <i>Perez Soltan</i>	7 Amount of contribution (\$) <i>5000</i>
6 Contributor address; City; State; Zip Code <i>16631 Pecan Dr. Sugar Land TX 77498</i>		

8 Principal occupation / Job title (See Instructions) <i>Self</i>	9 Employer (See Instructions) <i>Self</i>
--	--

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of contribution (\$)
Contributor address; City; State; Zip Code		

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 3/11/24	5 Payee name Courtney Grigsby Consulting	
6 Amount (\$) 10,100	7 Payee address; City; State; Zip Code 708 Main St. Houston TX 77002	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Voter outreach services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/23/24	Payee name Tammy Sanders Sandles		
Amount (\$) 480	Payee address; City; State; Zip Code 9855 Bammel North Houston TX 77086		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 2/23/24	Payee name Tara Pellerin		
Amount (\$) 80	Payee address; City; State; Zip Code 8019 Lynette St. Houston TX 77028		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME <i>Tavel Patel Campaign</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>4/07/24</i>	5 Payee name <i>ActBlue Technical Services</i>	
6 Amount (\$) <i>5.35</i>	7 Payee address; City; State; Zip Code <i>366 Summer St. Somerville MA 02144</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Fees</i>	(b) Description <i>Website fees for transactions</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate / Officeholder name	Office sought      Office held

Date <i>4/14/24</i>	Payee name <i>ActBlue Technical Services</i>		
Amount (\$) <i>2.38</i>	Payee address; City; State; Zip Code <i>366 Summer St. Somerville MA 02144</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Website fees for transactions</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

Date <i>4/21/24</i>	Payee name <i>ActBlue Technical Services</i>		
Amount (\$) <i>2.78</i>	Payee address; City; State; Zip Code <i>366 Summer St. Somerville MA 02144</i>		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Website fees for transactions</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH			
	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 4/28/24	5 Payee name ActBlue Technical Services
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6 Amount (\$) 0.99	7 Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Website fees - transactions
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 5/5/24	Payee name ActBlue Technical Services
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Amount (\$) 64.21	Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fees - transactions
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/12/24	Payee name ActBlue Technical Services
-----------------	--

Amount (\$) 105.70	Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fees - transactions
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 4/12/24	5 Payee name Google
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6 Amount (\$) 7.68	7 Payee address; 1600 Amphitheatre Parkway Mountain View CA 94041	City; Mountain View	State; CA	Zip Code 94041
-----------------------	--	------------------------	--------------	-------------------

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Google suite fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/12/24	Payee name Ascend Digital Strategies
-----------------	---

Amount (\$) 564.98	Payee address; 4840 Pearl East Circle Ste 210E Boulder CO 80301	City; Boulder	State; CO	Zip Code 80301
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting	Description Digital consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 4/13/24	Payee name Ascend Digital Strategies
-----------------	---

Amount (\$) 564.98	Payee address; 4840 Pearl East Circle Ste 210E Boulder CO 80301	City; Boulder	State; CO	Zip Code 80301
-----------------------	---	------------------	--------------	-------------------

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting	Description Digital consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 3/26/24	5 Payee name Chism Strategies
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6 Amount (\$) 1200	7 Payee address; 800 Maunship St. # 212	City; Jackson	State; MS	Zip Code 39202
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Consulting Services	(b) Description Voter Contact / Surveying
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/27/24	Payee name Last Word Strategies
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Amount (\$) 623.06	Payee address; 700 Camp St.	City; New Orleans	State; LA	Zip Code 70130
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Services	Description Digital Consulting Services
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/14/24	Payee name Taco Bell
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Amount (\$) 8.22	Payee address; 13325 University Blvd	City; Sugar Land	State; TX	Zip Code 77479
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food Expense	Description Food for volunteers
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 3/4/24	5 Payee name Google	
6 Amount (\$) 7.68	7 Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View CA 16009	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Google suite fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		
Candidate / Officeholder name		Office sought
		Office held

Date 3/4/24	Payee name Adrian Herrera		
Amount (\$) 350	Payee address; City; State; Zip Code 1858 Westwood Pr. Stafford TX 77477		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Field	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

Date 3/4/24	Payee name Relational Futures LLC		
Amount (\$) 3000	Payee address; City; State; Zip Code 1063 Ranier Dr. Houston TX 77031		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Voter Contact	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH			
Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 3/4/24		5 Payee name <del>Political Photos LLC</del> Ascend Digital Strategies			
6 Amount (\$) 564.98		7 Payee address; 4840 Pearl East Circle Ste 210 E		City; State; Zip Code Boulder CO 80301	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Digital Advertising		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/4/24		Payee name Ascend Digital Strategies			
Amount (\$) 808.32		Payee address; 4840 Pearl East Cir. Ste 210 E.		City; State; Zip Code Boulder CO 80301	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Digital Advertising		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
Date 3/4/24		Payee name Ascend Last Word Strategies			
Amount (\$) 1125.00		Payee address; 700 Camp St.		City; State; Zip Code New Orleans LA 70130	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Digital Advertising		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 2/25/24	5 Payee name Act Blue Technical Services	
6 Amount (\$) 240.02	7 Payee address; City; State; Zip Code 366 Summer St. Somerville MA 02144	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Website Fees - transaction
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 3/3/24	Payee name Act Blue Technical Services		
Amount (\$) 80.42	Payee address; City; State; Zip Code 366 Summer St. Somerville MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fees - transaction	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 3/10/24	Payee name Act Blue Technical Services		
Amount (\$) 20.37	Payee address; City; State; Zip Code 366 Summer St. Somerville MA 02144		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fees - transactions	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 3/17/24	5 Payee name ActBlue Technical Services
-------------------	--

6 Amount (\$) 2.38	7 Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Website fees for transactions
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/24/24	Payee name ActBlue Technical Services
-----------------	--

Amount (\$) 8.32	Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description website fees for transactions
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/31/24	Payee name ActBlue Technical Services
-----------------	--

Amount (\$) 198.49	Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description website fees for transactions
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date <i>6/30/24</i>	5 Payee name <i>AdBlue technical services</i>	
6 Amount (\$) <i>1.98</i>	7 Payee address; <i>366 Summer St.</i>	City; State; Zip Code <i>Somerville MA 02144</i>
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Website Fees</i>	(b) Description <i>Website fees for transactions</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date <i>3/10/24</i>	Payee name <i>Jena Newhouse</i>		
Amount (\$) <i>60</i>	Payee address; <i>2315 Bal Harbour Dr.</i>	City; State; Zip Code <i>Missauri City TX 77459</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Polis</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

Date <i>3/1/24</i>	Payee name <i>Shandria Hunt</i>		
Amount (\$) <i>80</i>	Payee address; <i>2928 Walnut Bend Ln.</i>	City; State; Zip Code <i>Houston TX 77042</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Contract Labor</i>	Description <i>Polis</i>	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 3/10/24	5 Payee name Tarsha Pellerin
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6 Amount (\$) 80	7 Payee address; 8014 Lynette St.	City; Houston	State; TX	Zip Code 77028
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/10/24	Payee name Simon Cornin III
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Amount (\$) 120	Payee address; 2023 Foxhill Dr.	City; Missouri City	State; TX	Zip Code 77489
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/10/24	Payee name Takesha Causey
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Amount (\$) 140	Payee address; 8600 S. Cause Dr. Apt 2322	City; Houston	State; TX	Zip Code 77099
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3/11/24	<b>5</b> Payee name Xavier Whaley	
<b>6</b> Amount (\$) 80	<b>7</b> Payee address; City; State; Zip Code 14114 Spring Knoll Posharon TX 77583	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor	<b>(b)</b> Description Polls
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 3/10/24	Payee name Sandra Morris		
Amount (\$) 120	Payee address; City; State; Zip Code 5822 Coyote Echo Dr. Katy TX 77449		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 3/10/24	Payee name Brandon Sylvester		
Amount (\$) 280	Payee address; City; State; Zip Code 13402 Lawnhaven Houston TX 77045		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 4/1/24	5 Payee name Safiah Ahmad
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6 Amount (\$) 375.30	7 Payee address; 1103 Luywine Ct.	City; Sugar Land	State; TX	Zip Code 77479
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Staffing
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/1/24	Payee name Adrian Herrera
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Amount (\$) 500	Payee address; 1858 Westwood Dr.	City; Stafford	State; TX	Zip Code 77477
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Field
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/1/24	Payee name Indo American News
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Amount (\$) 400	Payee address; 7457 Harwin Pr #262	City; Houston	State; TX	Zip Code 77036
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Newspaper Ad
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense  | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking   | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense   | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Credit Card Payment  | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 5/17/24	5 Payee name NGP VAN
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6 Amount (\$) 405.08	7 Payee address; 655 15th St. NW # 650	City; Washington	State; DC	Zip Code 20005
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Database
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/24/24	Payee name Pacific Coast Tacos Sugarland
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Amount (\$) 456.87	Payee address; 1525 Lake Pointe Pkwy # 600	City; Sugarland	State; TX	Zip Code 77478
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description food
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/28/24	Payee name Just Word Strategies
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Amount (\$) 650.00	Payee address; 700 Camp St.	City; New Orleans	State; LA	Zip Code 70130
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Digital Outreach
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date <b>3/10/24</b>		5 Payee name <b>Angela Randle</b>			
6 Amount (\$) <b>120</b>		7 Payee address; <b>8206 Sugar Cane Lane</b>		City; <b>Rosharon</b>	State; <b>TX</b>
				Zip Code <b>77543</b>	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <b>Contract Labor</b>		(b) Description <b>Polls</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <b>3/10/24</b>		Payee name <b>Felicia Moon</b>			
Amount (\$) <b>140</b>		Payee address; <b>3311 Raleigh Row</b>		City; <b>Missouri City</b>	State; <b>TX</b>
				Zip Code <b>77459</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Contract Labor</b>		Description <b>Polls</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date <b>3/10/24</b>		Payee name <b>Cecile Jackson</b>			
Amount (\$) <b>240</b>		Payee address; <b>15214 Oak View Trl.</b>		City; <b>Sugar Land</b>	State; <b>TX</b>
		<del>Spring Street Lane</del>		Zip Code <b>77498</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Contract Labor</b>		Description <b>Polls</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 3/11/24	5 Payee name Verleane Ashley
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6 Amount (\$) 260	7 Payee address; 12519 Mullville Dr.	City; Houston	State; TX	Zip Code 77089
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/10/24	Payee name Shelby Fitzhugh
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Amount (\$) 140	Payee address; 5647 Horseshoe Ln.	City; Missouri City	State; TX	Zip Code 77459
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/10/24	Payee name James Thomas
-----------------	----------------------------

Amount (\$) 250	Payee address; 3311 Rakish Row	City; Missouri City	State; TX	Zip Code 77459
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 3/10/24	5 Payee name Tera Pellerin	
6 Amount (\$) 340	7 Payee address; City; State; Zip Code 8014 Lynette St. Houston TX 77028	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 3/10/24	Payee name Gloria Clouser		
Amount (\$) 420	Payee address; City; State; Zip Code 3026 Pelican Grove Missouri City TX 77459		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 3/1/24	Payee name Lena Newhouse		
Amount (\$) 440	Payee address; City; State; Zip Code 2315 Bad Harbour Dr. Missouri City TX 77459		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 2/25/24	5 Payee name Andrew Robinson	
6 Amount (\$) 1008	7 Payee address; 7845 Cook Road	City; State; Zip Code Houston TX 77072
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/25/24	Payee name Shawnterra Wilkerson	
Amount (\$) 470	Payee address; 5646 Beltfort St.	City; State; Zip Code Houston TX 77033
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/25/24	Payee name Tarrha Pellerin	
Amount (\$) 360	Payee address; 8014 Lynette St.	City; State; Zip Code Houston TX 77028
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking Expense	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 3/19/24	5 Payee name Civitech
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6 Amount (\$) 404.01	7 Payee address; 21750 Hardy Oak Blvd Ste. 104	City; San Antonio	State; TX	Zip Code 78258
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Voter Contact Services
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/11/24	Payee name Sofiah Ahmad
-----------------	----------------------------

Amount (\$) 364	Payee address; 1103 Luysine Ct.	City; Sugar Land	State; TX	Zip Code 77479
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Staffing
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/23/24	Payee name Tanvir Khan
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Amount (\$) 300	Payee address; 15000 W. Airport #420	City; Sugar Land	State; TX	Zip Code 77479
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description photography
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 2/29/24		5 Payee name Five hour Subs			
6 Amount (\$) 26.49		7 Payee address; 3135 Hwy 6		City; Sugar Land	State; TX Zip Code 77478
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Food Expense		(b) Description Volunteer meal		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/26/24		Payee name Xfinity			
Amount (\$) 10.00		Payee address; 13540 University Blvd		City; Sugar Land	State; TX Zip Code 77479
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Office Internet		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/18/24		Payee name Act Blue Technical Services			
Amount (\$) 150.12		Payee address; 366 Summer St.		City; <del>Somerville</del> Somerville	State; MA Zip Code 02144
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description Website fees - transactions		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 5/19/24	5 Payee name Act Blue Technical Services
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6 Amount (\$) 206.02	7 Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Website fees for transactions
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/26/24	Payee name Act Blue Technical Services
-----------------	---

Amount (\$) 444.02	Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fees for transactions
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/2/24	Payee name Act Blue Technical Services
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Amount (\$) 203.43	Payee address; 366 Summer St.	City; Somerville	State; MA	Zip Code 02144
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Website fees for transactions
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date <i>6/8/24</i>	5 Payee name <i>ActBlue Technical Services</i>
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6 Amount (\$) <i>85.37</i>	7 Payee address; City; State; Zip Code <i>366 Summer St. Somerville MA 02144</i>
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <i>Fees</i>	(b) Description <i>Website fees for transactions</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>6/16/24</i>	Payee name <i>ActBlue Technical Services</i>
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Amount (\$) <i>34.99</i>	Payee address; City; State; Zip Code <i>366 Summer St. Somerville MA 02144</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Website fees for transactions</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>6/23/24</i>	Payee name <i>ActBlue Technical Services</i>
------------------------	---

Amount (\$) <i>2.58</i>	Payee address; City; State; Zip Code <i>366 Summer St. Somerville MA 02144</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Website fees for transactions</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 4/14/24	5 Payee name Relational Futures LLC
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6 Amount (\$) 2500	7 Payee address; 1063 Ranier Dr.	City; Houston	State; TX	Zip Code 77031
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Voter Contact Consulting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/15/24	Payee name Indian American Impact Fund
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Amount (\$) 300	Payee address; 498 S. Capitol St. SW Ste 407	City; Washington DC	State;	Zip Code 20003
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contribution Made by Candidate	Description Event fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 4/20/24	Payee name Relational Futures LLC
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Amount (\$) 2500	Payee address; 1063 Ranier Dr.	City; Houston TX	State;	Zip Code 77031
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Voter Contact Consulting
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 3/1/24	5 Payee name Shalonda Kennon
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6 Amount (\$) 320	7 Payee address; 8417 Hearth Dr. Apt 2	City; Houston	State; TX	Zip Code 77054
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/1/24	Payee name Tammie Mitchell
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Amount (\$) 360	Payee address; 3707 Clarke Manor	City; Missouri City	State; TX	Zip Code 77459
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/1/24	Payee name Tavsha Pelkerin
----------------	-------------------------------

Amount (\$) 580	Payee address; 8014 Lynette St.	City; Houston	State; TX	Zip Code 77028
--------------------	------------------------------------	------------------	--------------	-------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
----------------------------	--------------	---------------------------------------

4 Date 3/1/24	5 Payee name Melinda Caldwell
------------------	----------------------------------

6 Amount (\$) 645	7 Payee address; PO Box 98023	City; Houston	State; TX	Zip Code 77098
----------------------	----------------------------------	------------------	--------------	-------------------

8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/1/24	Payee name Cecile Jackson
----------------	------------------------------

Amount (\$) 660	Payee address; 15214 Oak View Trl.	City; Sugar Land	State; TX	Zip Code 77498
--------------------	---------------------------------------	---------------------	--------------	-------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/1/24	Payee name Brandon Sylvestr
----------------	--------------------------------

Amount (\$) 820	Payee address; 13402 Lunnhauen St	City; Houston	State; TX	Zip Code 77045
--------------------	--------------------------------------	------------------	--------------	-------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 3/1/24	5 Payee name Shanterra Wilkerson	
6 Amount (\$) 840	7 Payee address; 5646 Beltfort St	City; State; Zip Code Houston TX 77033
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 3/1/24	Payee name Tara Pellerin		
Amount (\$) 120	Payee address; 8014 Lynette St.	City; State; Zip Code Houston TX 77028	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

Date 3/1/24	Payee name Simon Cornin		
Amount (\$) 960	Payee address; 2023 Foxhill Dr.	City; State; Zip Code Missouri City TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
----------------------------	--------------	---------------------------------------

4 Date 3/5/24	5 Payee name VM Solutions
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6 Amount (\$) 14,582	7 Payee address; 12030 Greenrock Ln.	City; Houston	State; TX	Zip Code 77044
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Field
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/1/24	Payee name Jaylen Fitzhugh
----------------	-------------------------------

Amount (\$) 160	Payee address; 5647 Horseshoe #7s	City; Missouri City	State; TX	Zip Code 77459
--------------------	--------------------------------------	------------------------	--------------	-------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

Date 3/1/24	Payee name Vickie Walker
----------------	-----------------------------

Amount (\$) 420	Payee address; 5854 Flamingo Dr.	City; Houston	State; TX	Zip Code 77033
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 3/1/24	<b>5</b> Payee name Tasheka Coosey	
<b>6</b> Amount (\$) \$60	<b>7</b> Payee address; City; State; Zip Code 8600 S. Course Dr. Apt 2322 Houston TX 77099	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor	<b>(b)</b> Description Polls
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date 3/1/24	Payee name Felicia Moon		
Amount (\$) 1025	Payee address; City; State; Zip Code 3311 Raleigh Row Missouri City TX 77459		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 3/1/24	Payee name James Thomas		
Amount (\$) 1650	Payee address; City; State; Zip Code 3311 Raleigh Row Missouri City TX 77459		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
----------------------------	--------------	---------------------------------------

4 Date 3/1/24	5 Payee name Shelby Fitzhugh
------------------	---------------------------------

6 Amount (\$) 740	7 Payee address; 5647 Horseshoe Pls	City; Missouri City	State; TX	Zip Code 77459
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/24/24	Payee name Shalanda Kennon
-----------------	-------------------------------

Amount (\$) 340	Payee address; 8417 Hearth Dr. Apt 2	City; Houston	State; TX	Zip Code 77054
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name Lena Newhouse
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Amount (\$) 400	Payee address; 2315 Bal Harbour Dr.	City; Missouri City	State; TX	Zip Code 77459
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 2/27/24		5 Payee name Last Word Strategies			
6 Amount (\$) 525		7 Payee address; 700 Camp St.		City; New Orleans	State; Zip Code LA 70130
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Digital Advertising		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/27/24		Payee name Last Word Strategies			
Amount (\$) 7193.11		Payee address; 700 Camp St.		City; New Orleans	State; Zip Code LA 70130
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Digital Advertising		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/25/24		Payee name Gujarati Samaj of Houston			
Amount (\$) 150		Payee address; 9550 W. Bellfort Ave		City; Houston TX	State; Zip Code TX 77031
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Donations made by candidate		Description event sponsorship		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 2/25/24	5 Payee name Cecile Jackson	
6 Amount (\$) 220	7 Payee address; City; State; Zip Code 15214 Oak View Trl. Sugar Land TX 77498	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/27/24	Payee name Courtney <sup>Grigsby</sup> <del>Grigsby</del> Consulty	
Amount (\$) 6250	Payee address; City; State; Zip Code 708 Main St. Houston TX 77002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulty Expense	Description Media outreach
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 4/14/24	Payee name Hampton Inn & Suites Sugar Land	
Amount (\$) 1000	Payee address; City; State; Zip Code 218 Promenade Wy Sugar Land Tx 77479	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Victory party rental
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 5/1/24	5 Payee name Pakistan Times	
6 Amount (\$) 750	7 Payee address; City; State; Zip Code 12375 Bissonnet St. Houston TX 77099	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Newspaper Advertisement
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/25/24	Payee name Vichie Walker		
Amount (\$) 240	Payee address; City; State; Zip Code 5854 Flamingo Dr. Houston TX 77033		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 2/25/24	Payee name Roy Caldwell		
Amount (\$) 180	Payee address; City; State; Zip Code PO Box 98023 Houston TX 77088		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 2/25/24		5 Payee name TAM Printing			
6 Amount (\$) 5000		7 Payee address; 13910 Murphy Rd.		City; Stafford	State; TX
				Zip Code 77477	
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description Field materials		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
				Office held	
Date 2/25/24		Payee name Simon R. Cornin III			
Amount (\$) 560		Payee address; 2023 Foxhill Dr.		City; Missouri City	State; TX
				Zip Code 77489	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Polls		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
				Office held	
Date 2/25/24		Payee name TAM Printing			
Amount (\$) 3000		Payee address; 13910 Murphy Rd.		City; Stafford	State; TX
				Zip Code 77477	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description field materials		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	
				Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
4 Date 2/25/24		5 Payee name Cecile Jackson					
6 Amount (\$) 220		7 Payee address; 15214 Oak View Trl.			City; Sugar Land	State; TX	Zip Code 77498
8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) Contract Labor			(b) Description Polls			
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	
Date 2/26/24		Payee name Jaylen Fitzhugh					
Amount (\$) 240		Payee address; 5647 Horseshoe Pk			City; Missouri City	State; TX	Zip Code 77459
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor			Description Polls			
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	
Date 2/26/24		Payee name James Thomas					
Amount (\$) 1000		Payee address; 3311 Raleigh Row			City; Missouri City	State; TX	Zip Code 77459
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor			Description Polls			
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought		Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 3/4/24		5 Payee name Last Word Strategies			
6 Amount (\$) 4120.29		7 Payee address; 700 Camp St.		City; New Orleans	State; Zip Code LA 70130
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Digital Advertising		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 3/4/24	Payee name Ivan <del>_____</del> Oregon				
Amount (\$) 650	Payee address; <del>_____ St.</del> 8914 Kelburn Dr.		City; Houston	State; Zip Code TX 77046	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Field		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/26/24	Payee name Courtney Crigsby Consulting				
Amount (\$) 18,445	Payee address; 705 Main St.		City; Houston	State; Zip Code TX 77002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description Voter Outreach		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 2/26/24		5 Payee name Felicia Moon			
6 Amount (\$) 950		7 Payee address; 3311 Raleigh Row		City; Missouri City	State; Zip Code TX 77459
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Polls		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/26/24		Payee name Melinda Caldwell			
Amount (\$) 720		Payee address; PO Box 18023		City; Houston	State; Zip Code TX 77098
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Polls		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 2/26/24		Payee name Shelby Fitzhugh			
Amount (\$) 700		Payee address; 5647 Horseshoe Pl		City; Missouri City	State; Zip Code TX 77459
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Polls		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
4 Date 2/26/24	5 Payee name Dayshone Sylvester	
6 Amount (\$) 580	7 Payee address; City; State; Zip Code 13402 Lawnhaven Houston TX 77045	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/26/24	Payee name Brandon Sylvester	
Amount (\$) 560	Payee address; City; State; Zip Code 13402 Lawnhaven Houston TX 77045	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/26/24	Payee name Gloria Clouser	
Amount (\$) 560	Payee address; City; State; Zip Code 3026 Pelican Cove Missouri City TX 77459	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:		2 FILER NAME		3 Filer ID (Ethics Commission Filers)	
4 Date 2/24/24		5 Payee name Tashika Causey			
6 Amount (\$) 560		7 Payee address; 8600 S. Course Dr. Apt 2322 Houston TX		City;	State; Zip Code TX 77099
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract Labor		(b) Description Polls		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 6/5/24		Payee name Adrian Herrera			
Amount (\$) 257		Payee address; 1858 Westwood Dr.		City; Stafford TX	State; Zip Code TX 77477
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description field		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 6/3/24		Payee name Sofrah Ahmad			
Amount (\$) 668.20		Payee address; 1103 Ivyvine Ct.		City; Sugar Land TX	State; Zip Code TX 77479
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor		Description Field		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

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### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 5/2/24	5 Payee name Google
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6 Amount (\$) 8.87	7 Payee address; 1600 Amphitheatre Parkway	City; Mountain View	State; CA	Zip Code 16009
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Google suite
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/2/24	Payee name NGP VAN
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Amount (\$) 159.90	Payee address; 655 15th St. NW #650	City; Washington DC	State;	Zip Code 20005
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Database
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/14/24	Payee name Relational Futures LLC
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Amount (\$) 1000	Payee address; 1063 Ranter Dr.	City; Houston TX	State;	Zip Code 77031
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description Water Contact
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
<b>4</b> Date 6/7/24	<b>5</b> Payee name NGP VAN	
<b>6</b> Amount (\$) 31.98	<b>7</b> Payee address; City; State; Zip Code 655 15 <sup>th</sup> St. NW #650 Washington DC 20005	
<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description Mobilize add on fee
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date 6/3/24	Payee name Google		
Amount (\$) 12.79	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View CA 16009		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Google Suite	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date 6/3/24	Payee name NGP VAN		
Amount (\$) 405.08	Payee address; City; State; Zip Code 655 15 <sup>th</sup> St. NW #650 Washington DC 20005		
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Fees	Description Database	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
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4 Date 2/28/24	5 Payee name Michael Perry
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6 Amount (\$) 480	7 Payee address; 4003 Figure Four Ct. Richmond TX	City; Richmond TX	State; TX	Zip Code 77406
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8 <b>PURPOSE OF EXPENDITURE</b>	(a) Category (See Categories listed at the top of this schedule) <del>FEES</del> Contract Labor	(b) Description Polls
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/1/24	Payee name Sandra Morris
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Amount (\$) 560	Payee address; 5822 Coyote Echo Dr.	City; Katy TX	State; TX	Zip Code 77449
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/23/24	Payee name Gerleanne Asbury
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Amount (\$) 680	Payee address; 12519 Mullville Pr.	City; Houston TX	State; TX	Zip Code 77087
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

# SCHEDULE F1

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

### EXPENDITURE CATEGORIES FOR BOX 8(a)

- |  |                               |                                |  |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense                        | Event Expense                 | Loan Repayment/Reimbursement   | Solicitation/Fundraising Expense           |
| Accounting/Banking                         | Fees                          | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense                         | Food/Beverage Expense         | Polling Expense                | Travel In District                         |
| Contributions/Donations Made By            | Gift/Awards/Memorials Expense | Printing Expense               | Travel Out Of District                     |
| Candidate/Officeholder/Political Committee | Legal Services                | Salaries/Wages/Contract Labor  | Other (enter a category not listed above)  |
| Credit Card Payment                        |                               |                                |  |

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1:	<b>2</b> FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
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<b>4</b> Date 3/10/24	<b>5</b> Payee name Tammy Sandles
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<b>6</b> Amount (\$) 63.00	<b>7</b> Payee address; 9955 Bammel Road North	City; Houston	State; TX	Zip Code 77086
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<b>8</b> <b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contract Labor	<b>(b)</b> Description Polls
	<b>(c)</b> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/10/24	Payee name Tamiz Mitchell
-----------------	------------------------------

Amount (\$) 140	Payee address; 3707 Clark Manor	City; Missouri City	State; TX	Zip Code 77057
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/10/24	Payee name Felicia Moon
-----------------	----------------------------

Amount (\$) 2345	Payee address; 3311 Patrik Row	City; Missouri City	State; TX	Zip Code 77459
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Contract Labor	Description Polls
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
--	-------------------------------	---------------	-------------

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