

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

15 C/OH NAME		JIMMY LEE EVANS, III	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)	\$ 0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 9816.20
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$ 5381.22
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4593.78
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

/s/JLE,III

Signature of Candidate or Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

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

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

OR

(2) Unsworn Declaration

My name is JIMMY LEE EVANS, III, and my date of birth is 01/25/66.

My address is 9711 South Mason Rd #491, Richmond, TX, 77407, USA.
(street) (city) (state) (zip code) (country)

Executed in Fort Bend County, State of TX, on the 10th day of January, 2024.
(month) (year)

/s/JLE,III

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME JIMMY LEE EVANS, III		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 7125.00
2. <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$ 2691.20
3. <input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. <input type="checkbox"/> SCHEDULE E: LOANS		\$
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS		\$ 3181.22
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS		\$
8. <input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 2200.00
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: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 08/10/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynette Scott <hr/> 6 Contributor address; City; State; Zip Code 8318 Kirkbrook Dr Houston TX 77089	7 Amount of contribution (\$) 500.00
8 Principal occupation / Job title (See Instructions) Management		9 Employer (See Instructions) CMC
Date 08/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norma Andrade <hr/> Contributor address; City; State; Zip Code 2007 Greensford Ct Houston TX 77049	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 08/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kia Scales <hr/> Contributor address; City; State; Zip Code 3 Dessert Willow Ct Manvel TX 77578	Amount of contribution (\$) 500.00
Principal occupation / Job title (See Instructions) Contract Administrator		Employer (See Instructions) Harris Health System
Date 08/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tamika Givens <hr/> Contributor address; City; State; Zip Code 6511 Pinebrook Bridge Ln Spring TX 77379	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co

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: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 08/14/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Samuel Glaze <hr/> 6 Contributor address; City; State; Zip Code 3511 Trail Bend Missouri City TX 77459-2699	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) law enforcement		9 Employer (See Instructions) Houston
Date 08/14/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Irvin Marshall <hr/> Contributor address; City; State; Zip Code 603 S Marathon Way Stafford TX 77477	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) N/A
Date 08/15/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichole Allen <hr/> Contributor address; City; State; Zip Code 10307 Bretton Houston TX 77016	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 08/15/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Williams <hr/> Contributor address; City; State; Zip Code 9423 Bronze Shore Dr Rosharon TX 77583	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Missouri City

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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: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 08/17/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chaka Long <hr/> 6 Contributor address; City; State; Zip Code 4407 Arcola Landing Ct Porter TX 77365	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) law enforcement		9 Employer (See Instructions) Harris Co
Date 08/17/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon Smith <hr/> Contributor address; City; State; Zip Code PO Box 62023 Houston TX 77205	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) N/A
Date 08/19/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Traviata Lewis <hr/> Contributor address; City; State; Zip Code 8506 Aster Glen Way Rosharon TX 77583	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 08/20/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reginald Lewis <hr/> Contributor address; City; State; Zip Code 20407 Sabal Palms Pk Katy TX 77449	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
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: 10
2 FILER NAME <p style="text-align: center;">JIMMY LEE EVANS, III</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align: center;">08/21/23</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kenneth Johnson	7 Amount of contribution (\$) <p style="text-align: center;">25.00</p>
6 Contributor address; City; State; Zip Code 185 Western Way Waxahachie TX 75165		
8 Principal occupation / Job title (See Instructions) Sales		9 Employer (See Instructions) Coca-Cola Southwest
Date <p style="text-align: center;">09/05/23</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry Douglas	Amount of contribution (\$) <p style="text-align: center;">50.00</p>
Contributor address; City; State; Zip Code 2401 W Pflugerville Pkwy #514 Round Rock TX 78664		
Principal occupation / Job title (See Instructions) Education		Employer (See Instructions) TX State University
Date <p style="text-align: center;">09/06/23</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kia Johnson Scales	Amount of contribution (\$) <p style="text-align: center;">500.00</p>
Contributor address; City; State; Zip Code 3 Desert Willow Ct Manvel TX 77578		
Principal occupation / Job title (See Instructions) Contract Administrator		Employer (See Instructions) Harris Health System
Date <p style="text-align: center;">09/09/23</p>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kevin Raven	Amount of contribution (\$) <p style="text-align: center;">200.00</p>
Contributor address; City; State; Zip Code 2619 Autrey Landing Missouri City TX 77459		
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Houston

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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: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 09/18/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herschel Smith <hr/> 6 Contributor address; City; State; Zip Code PO Box 653 Prairie View TX 77446	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) unemployed		9 Employer (See Instructions) N/A
Date 09/29/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reginald Lewis <hr/> Contributor address; City; State; Zip Code 20407 Sabal Palms Pk Katy TX 77449	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 10/01/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Octavia Elmore <hr/> Contributor address; City; State; Zip Code 184 Fawaz Dr Killeen TX 76542	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) N/A
Date 10/12/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reginald Lewis <hr/> Contributor address; City; State; Zip Code 20407 Sabal Palms Pk Katy TX 77449	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 11/09/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reginald Lewis <hr/> 6 Contributor address; City; State; Zip Code 20407 Sabal Palms Pk Katy TX 77449	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) law enforcement		9 Employer (See Instructions) Harris Co
Date 11/10/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tramaine Jackson <hr/> Contributor address; City; State; Zip Code 8827 Roaring Point Dr Houston TX 77088	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 11/17/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph Campbell <hr/> Contributor address; City; State; Zip Code 2410 Quiver Ln Houston TX 77067	Amount of contribution (\$) 75.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 11/25/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Courtney Waller <hr/> Contributor address; City; State; Zip Code 1200 Travis Houston TX 77002	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Houston
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 11/25/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cedric Collier <hr/> 6 Contributor address; City; State; Zip Code 9207 Willow St Houston TX 77088	7 Amount of contribution (\$) 50.00
8 Principal occupation / Job title (See Instructions) law enforcement		9 Employer (See Instructions) Harris Co
Date 11/25/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redell Wooten <hr/> Contributor address; City; State; Zip Code 9719 W. Airport Houston TX 77031	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) N/A
Date 11/26/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Drake <hr/> Contributor address; City; State; Zip Code 611 Shepherd Dr #214 Houston TX 77007	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 11/27/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Althea Grimage <hr/> Contributor address; City; State; Zip Code 9900 Preserve Way Conroe TX 77385	Amount of contribution (\$) 250.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
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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: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 12/01/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard Tyson <hr/> 6 Contributor address; City; State; Zip Code 1324 North Houston Ave Humble TX 77338	7 Amount of contribution (\$) 200.00
8 Principal occupation / Job title (See Instructions) Chefs O.O.		9 Employer (See Instructions) Gemstone Management
Date 12/08/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reginald Lewis <hr/> Contributor address; City; State; Zip Code 20407 Sabal Palms Pk Katy TX 77449	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 12/09/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Osa Robinson <hr/> Contributor address; City; State; Zip Code 19006 Serrano Gap Ct Cypress TX 77429	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) N/A
Date 12/09/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tony Spears <hr/> Contributor address; City; State; Zip Code 1719 Panorama Dr Locus Grove GA 30248	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) N/A
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

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 10
2 FILER NAME JIMMY LEE EVANS, III		3 Filer ID (Ethics Commission Filers)
4 Date 12/11/23	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lajah Richardson	7 Amount of contribution (\$) 100.00
6 Contributor address; City; State; Zip Code 3518 Tealwater Ct Katy TX 77449		
8 Principal occupation / Job title (See Instructions) law enforcement		9 Employer (See Instructions) Harris Co
Date 12/11/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemarley Braham	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code 1011 Honeysuckle Vine Dr Rosenberg TX 77469		
Principal occupation / Job title (See Instructions) law enforcement		Employer (See Instructions) Harris Co
Date 12/13/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willie Hodge	Amount of contribution (\$) 250.00
Contributor address; City; State; Zip Code PO Box 681463 Houston TX 77268		
Principal occupation / Job title (See Instructions) Entrepreneur		Employer (See Instructions) Self Employed
Date 12/13/23	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig Player	Amount of contribution (\$) 1000.00
Contributor address; City; State; Zip Code 1428 Shadybrook DeSoto TX 75115		
Principal occupation / Job title (See Instructions) unemployed		Employer (See Instructions) N/A

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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: 10
2 FILER NAME <p style="text-align: center;">JIMMY LEE EVANS, III</p>		3 Filer ID (Ethics Commission Filers)
4 Date <p style="text-align: center;">12/13/23</p>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Darrell Burns, Sr.</p> <hr style="border-top: 1px dotted black;"/> 6 Contributor address; City; State; Zip Code <p style="text-align: center;">13726 Firerock Dr Houston TX 77085</p>	7 Amount of contribution (\$) <p style="text-align: center;">100.00</p>
8 Principal occupation / Job title (See Instructions) <p style="text-align: center;">law enforcement</p>		9 Employer (See Instructions) <p style="text-align: center;">SJCPD</p>
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

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 A2: 1	
2 FILER NAME <p style="text-align: center;">JIMMY LEE EVANS, III</p>		3 Filer ID (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 2691.20	
5 Date <p style="text-align: center;">12/08/23</p>	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <p style="text-align: center;">Reginald Lewis</p>	8 Amount of Contribution \$ <p style="text-align: center;">2691.20</p>	9 In-kind contribution description <p style="text-align: center;">Signage</p>
7 Contributor address; City; State; Zip Code <p style="text-align: center;">20407 Sabal Palms Pk Katy TX 77449</p>		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions) <p style="text-align: center;">law enforcement</p>		11 Employer (FOR NON-JUDICIAL)(See Instructions) <p style="text-align: center;">Harris Co</p>	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL)(See Instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution \$	In-kind contribution description
	Contributor address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL)(See Instructions)		Employer (FOR NON-JUDICIAL)(See Instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL)(See Instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.			

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: 4	2 FILER NAME JIMMY LEE EVANS, III	3 Filer ID (Ethics Commission Filers)
4 Date 08/15/23	5 Payee name HARLAND CLARKE CHECK/ACC. 081423 00685297575482 JIMMY L EVANS (\$40.33)	
6 Amount (\$) 40.33	7 Payee address; 3981 BARKER CYPRESS RD HOUSTON TX 77084	City; State; Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Checks
	(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 09/05/23	Payee name PURCHASE AUTHORIZED ON 09/04 FACEBK L3HD5RBL42 650-5434800 CA S463247799816957 CARD 9298	
Amount (\$) 10.00	Payee address; Facebook 1 Hacker Way Menlo Park CA 94025	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description 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 09/08/23	Payee name PURCHASE AUTHORIZED ON 09/07 FACEBK *2SMM6S3L42 fb.me/ads CA S463250530390615 CARD 9298	
Amount (\$) 12.17	Payee address; Facebook 1 Hacker Way Menlo Park CA 94025	City; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description 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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 4	2 FILER NAME JIMMY LEE EVANS, III	3 Filer ID (Ethics Commission Filers)
4 Date 09/20/23	5 Payee name TGM PRINTING	
6 Amount (\$) 169.44	7 Payee address; 13910 Murphy Rd	City; State; Zip Code Stafford TX 77477
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description signs, push cards
	(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 10/10/23	Payee name JS MCEWEN SERVICES LLC c/o Sataria McEwen	
Amount (\$) 187.00	Payee address; 24206 Wild Bramble Ln	City; State; Zip Code Katy TX 77493-1184
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description T-shirts
	<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 11/25/23	Payee name FBC Democratic Party	
Amount (\$) 1000.00	Payee address; 13515 Southwest Fwy #204	City; State; Zip Code Sugar Land TX 77478
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Polling Expense	Description DNC Primary
	<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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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: 4	2 FILER NAME JIMMY LEE EVANS, III	3 Filer ID (Ethics Commission Filers)
4 Date 11/25/23	5 Payee name Cynthia Ginyard, Chair, Democratic Party c/o TX Ethics Commission	
6 Amount (\$) 1000.00	7 Payee address; 13515 Southwest Fwy #204	City; State; Zip Code Sugar Land TX 77478
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense	(b) Description DNC Primary
	(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 12/04/23	Payee name New Territory Residential Community Association	
Amount (\$) 340.00	Payee address; 6101 Homeward Way	City; State; Zip Code Sugar Land TX 77479
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense	Description Meet & Greet
	<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 08/14/23 – 12/13/23	Payee name ACTBLUE	
Amount (\$) 196.56	Payee address; 366 Summer St	City; State; Zip Code Somerville MA 02144-3132
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Fees
	<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: 4	2 FILER NAME JIMMY LEE EVANS, III	3 Filer ID (Ethics Commission Filers)
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4 Date 08/17/23 - 09/17/23	5 Payee name PAYPAL
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6 Amount (\$) 5.32	7 Payee address; 2211 N 1st St	City; San Jose	State; CA	Zip Code 95131
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description 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	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<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	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 2	2 FILER NAME JIMMY LEE EVANS, III	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 08/09/23	6 Payee name PIGGY'S RESTAURANT	
7 Amount (\$) 1100.00	8 Payee address; 3412 West Lamar Street	City; State; Zip Code Houston TX 77019
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Meet & Greet
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 11/27/23	Payee name (TDP) TX Democratic Party	
Amount (\$) 550.00	Payee address; 13515 Southwest Fwy #204	City; State; Zip Code Sugar Land TX 77478
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising expense	Description Database Fees
	<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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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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

EXPENDITURE CATEGORIES FOR BOX 10(a)

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|--|-------------------------------|--------------------------------|--|
| 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) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 2	2 FILER NAME JIMMY LEE EVANS, III			3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD				\$
5 Date 12/21/23	6 Payee name (TDP) TX Democratic Party			
7 Amount (\$) 550.00	8 Payee address; 13515 Southwest Fwy #204	City; Sugar Land	State; TX	Zip Code 77478
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political			
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising expense		(b) Description Database Fees	
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held	
Date	Payee name			
Amount (\$)	Payee address;	City;	State;	Zip Code
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description	
	<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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