

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 31	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Teana	OFFICE USE ONLY Date Received JAN 17 2024 RCVD		
	NICKNAME LAST SUFFIX Watson			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 10701 Corporate Drive Suite 185 Stafford, TX 77477	Date Hand-delivered or Date Postmarked		
		Receipt #	Amount	
		Date Processed		
		Date Imaged		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Deborah			
	NICKNAME LAST SUFFIX Mitchell			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2726 Plantation Wood Missouri City, TX 77459			
7 CAMPAIGN TREASURER PHONE	AREA CODE (281)	PHONE NUMBER 851	EXTENSION 9051	
8 REPORT TYPE	<input checked="" 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 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)			
9 PERIOD COVERED	Month Day Year 07/01/2023	THROUGH		Month Day Year 12/31/2023
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE	
			<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Statutory County Judge Fort Bend County Court at Law # 5		OFFICE SOUGHT (if known) Judge, County Court at Law # 5	

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 31

13 C / OH NAME Watson, Teana	14 Filer ID
---------------------------------	-------------

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

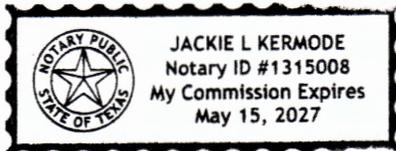
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 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)	\$	15,529.32
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	7,902.88
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	37,496.53
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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.



Teana V. Watson

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Teana V. Watson, this the 17th day of January, 2024, to certify which, witness my hand and seal of office.

Jackie L. Kermode Jackie L. Kermode Notary
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Watson, Teana		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 11,550.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 3,979.32
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,196.93
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 705.95
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/11 Rpt: 4/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adekoya, Tony (Mr.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 2606 Big Vine Court Missouri City , TX 77459		
8 Contributor's Principal Occupation Tax Auditor		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bobrick, Bill	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code P.O. Box 637 Sugar Land, TX 77487		
Contributor's Principal Occupation clerk assistant		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carothers, Sonya	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 13530 Schumann Trail Sugar Land , TX 77498		
Contributor's Principal Occupation Nurse		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/11 Rpt: 5/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter , Wilvin	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 15 Cinque Terre Dr Missouri City, TX 77459		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ceasar, Kendric	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5022 Bricker Street Houston , TX 77033		
Contributor's Principal Occupation attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cease, Allan	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 56 Sugar Creek Sugar Land , TX 77478		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/11 Rpt: 6/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dave , Radhika <hr/> 6 Contributor address; City; State; Zip Code 201 South 11th Street Richmod, TX 77469	7 Amount of Contribution (\$) \$200.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/18/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drenon, Brent <hr/> Contributor address; City; State; Zip Code 743 Park Rd. NW Washington DC, DC 20010	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/10/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drenon, Margaret (Mrs.) <hr/> Contributor address; City; State; Zip Code 2806 Red Oak Lane Pearland, TX 77584	Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation nurse		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/11 Rpt: 7/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Echols, Brigette	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 14107 FM 442 Road needville , TX 77461		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm Schlumberger		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fort Bend United PAC	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code PO Box 420811 Houston, TX 77242		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gbenjo, Anne (Mrs.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 9009 Bissonnet Street Houston, TX 77074		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/11 Rpt: 8/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 10/16/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris , Toi (Dr.)	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 3810 Rita Elliott Ct Missouri City, TX 77459		
8 Contributor's Principal Occupation Medical Doctor		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horgan, Cynthia	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 5015 Regency Dr. Sugar Land , TX 77479		
Contributor's Principal Occupation Business Owner		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julian, Lloyd	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 8211 Fawn Terrace Dr. Houston, TX 77071		
Contributor's Principal Occupation real estate investor		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/11 Rpt: 9/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 08/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klitsas, Loren	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 19810 Tidy Tips Lane Spring, TX 77379		
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title
10 Contributor's employer/law firm Klitsas & Vercher PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klosowsky, Phil	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 14015 S W Frwy Suite 14 Sugar Land, TX 77478		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lacsamana, Antonio (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3107 Winchester Way Sugar Land , TX 77479		
Contributor's Principal Occupation Business Owner		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/11 Rpt: 10/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCoy, Dexter (Commissioner)	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 23534 McNabb Spur Lane Richmond, TX 77469		
8 Contributor's Principal Occupation commissioner		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Robin	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code TX		
Contributor's Principal Occupation retired		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moerer, Carl	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 206 South 2nd Street Richmond, TX 77469		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/11 Rpt: 11/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/26/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mr. Jones Bail Bonds	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1100 Mulcahy Street Rosenberg, TX 77471		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nwanguma, Grace	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 211 Houston Street Ste A Richmond, TX 77469		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Pheobe	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 4418 Waynesboro DR. Houston, TX 77035		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/11 Rpt: 12/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/30/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swindell, Charles	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 1802 Lake Quitman Richmond, TX 77406		
8 Contributor's Principal Occupation retired		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tate, Richard	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code 206 South 2nd Street Richmond, TX 77469		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/30/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Terry, T.K.	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 20607 Montview Ct Katy, TX 77450		
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/11 Rpt: 13/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 11/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tu, Paul (Mr.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code 10101 Southwest Freeway #370 Houston, TX 77074		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Velasquez, Rudy	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 907 Sugarfield Sugar Land , TX 77498		
Contributor's Principal Occupation attorney		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Beverley (The Honorable)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code P.O. BOX 270005 Houston, TX 77277		
Contributor's Principal Occupation District Clerk		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/11 Rpt: 14/31
2 FILER NAME Watson, Teana		3 Filer ID
4 Date 12/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Willis, Marsha	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 3306 Prospect Ct Missouri City, TX 77459		
8 Contributor's Principal Occupation retired		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 15/31	
2 FILER NAME Watson, Teana		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 11/29/2023	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franks, Julie	8 Amount of contribution (\$) \$2,400.00	9 In-kind contribution description food and drinks for fund raiser
	7 Contributor address; City; State; Zip Code 23210 Redberry Lane Katy, TX 77494	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Buyer		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 11/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Franks, Robert (Mr.)	Amount of contribution (\$) \$1,579.32	In-kind contribution description food and drinks for fund raiser
	Contributor address; City; State; Zip Code 512 South 11th Street Richmond, TX 77469	<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) Attorney		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)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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: Sch: 1/13 Rpt: 16/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 07/26/2023	5 Payee name Braids by Sarah	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code Sugar Land , TX 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) hair styling for events	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense hair style for 6 weeks
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2023	Payee name Brandanis	
Amount (\$) \$99.00	Payee address; City; State; Zip Code 3340 FM 1092 Missouri City , TX 77459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner with consultant
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2023	Payee name Child Advocates of Fort Bend	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 5403 Avenue N Rosenberg, TX 77471	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense charitable contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/13 Rpt: 17/31	2 FILER NAME Watson, Teana	3 Filer ID
---	--------------------------------------	-------------------

4 Date 07/10/2023	5 Payee name Constant Contacts
-----------------------------	--

6 Amount (\$) \$85.28	7 Payee address; City; State; Zip Code 1601 Trapelo Rd. Waltham , MA
---------------------------------	---

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

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

Date 08/10/2023	Payee name Constant Contacts
--------------------	---------------------------------

Amount (\$) \$85.28	Payee address; City; State; Zip Code 1601 Trapelo Rd. Waltham , MA
------------------------	--

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

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

Date 09/11/2023	Payee name Constant Contacts
--------------------	---------------------------------

Amount (\$) \$85.28	Payee address; City; State; Zip Code 1601 Trapelo Rd. Waltham , MA
------------------------	--

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

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

--	--	--	--

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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: Sch: 3/13 Rpt: 18/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 10/10/2023	5 Payee name Constant Contacts	
6 Amount (\$) \$85.28	7 Payee address; City; State; Zip Code 1601 Trapelo Rd. Waltham , MA	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense email marketing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2023	Payee name Constant Contacts	
Amount (\$) \$85.28	Payee address; City; State; Zip Code 1601 Trapelo Rd. Waltham , MA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense marketing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/11/2023	Payee name Constant Contacts	
Amount (\$) \$85.28	Payee address; City; State; Zip Code 1601 Trapelo Rd. Waltham , MA	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense emails
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/13 Rpt: 19/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 07/02/2023	5 Payee name Covenant Glen Church	
6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 5243 Savannah Pkwy Rosharon, TX 77583	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense church offering
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/22/2023	Payee name DAYA Inc.	
Amount (\$) \$102.90	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense charitable contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/14/2023	Payee name Eddie Vs	
Amount (\$) \$192.35	Payee address; City; State; Zip Code Town & Country Houston , TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Manager's birthday dinner
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	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: Sch: 5/13 Rpt: 20/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 08/07/2023	5 Payee name Fadis	
6 Amount (\$) \$44.92	7 Payee address; City; State; Zip Code sugar land , TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting with consultant
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2023	Payee name First Watch	
Amount (\$) \$46.91	Payee address; City; State; Zip Code sugar land , TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense breakfast meeting
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2023	Payee name Fort Ben Independent Newspaper	
Amount (\$) \$50.00	Payee address; City; State; Zip Code Stafford, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 4th of July Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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: Sch: 6/13 Rpt: 21/31	2 FILER NAME Watson, Teana	3 Filer ID
---	--------------------------------------	-------------------

4 Date 11/27/2023	5 Payee name Fort Bend Democratic Party
-----------------------------	---

6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 13515 Southwest Frwy Ste. 204 Sugar Land , TX 77478
------------------------------------	--

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

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

Date 09/26/2023	Payee name Fort Bend Family Promise
--------------------	--

Amount (\$) \$100.00	Payee address; City; State; Zip Code TX
-------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense charitable contribution
-------------------------------	---	---

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

Date 07/17/2023	Payee name Grazia
--------------------	----------------------

Amount (\$) \$43.31	Payee address; City; State; Zip Code Pearland, TX
------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense meeting w/consultant
-------------------------------	--	--

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

--	--	--	--

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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: Sch: 7/13 Rpt: 22/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 09/25/2023	5 Payee name HEB	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 530 Highway 6 Sugar Land , TX 77478	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense floral for constituent
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2023	Payee name Hussain, Farzad	
Amount (\$) \$240.00	Payee address; City; State; Zip Code Sugar Land, TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website design
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/29/2023	Payee name Kirby , Photos	
Amount (\$) \$200.00	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense updated photo shots
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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: Sch: 8/13 Rpt: 23/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 11/20/2023	5 Payee name LilsThings	
6 Amount (\$) \$85.00	7 Payee address; City; State; Zip Code TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Christmas Gifts for supporters
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/21/2023	Payee name Marcos Pizza	
Amount (\$) \$33.56	Payee address; City; State; Zip Code Richmond, TX 77469	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense pizza for office staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2023	Payee name Marsha Willis Personal Trainer	
Amount (\$) \$440.00	Payee address; City; State; Zip Code Missouri City , TX 77459	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gym and exercise training for stress relief
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/13 Rpt: 24/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 09/18/2023	5 Payee name NAACP	
6 Amount (\$) \$102.50	7 Payee address; City; State; Zip Code Missouri City , TX	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fundraiser
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/08/2023	Payee name Pappadeaux Restaurant	
Amount (\$) \$52.00	Payee address; City; State; Zip Code 12711 S.W. frwy Stafford, TX 77477	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense lunch with consultant
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/11/2023	Payee name Perry's Steakhouse	
Amount (\$) \$141.00	Payee address; City; State; Zip Code 15958 City Walk Sugar Land , TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense dinner with colleagues
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/13 Rpt: 25/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 07/17/2023	5 Payee name T-Mobile	
6 Amount (\$) \$72.10	7 Payee address; City; State; Zip Code Sugar Land TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/07/2023	Payee name T-Mobile	
Amount (\$) \$94.59	Payee address; City; State; Zip Code Sugar Land TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/08/2023	Payee name T-Mobile	
Amount (\$) \$89.59	Payee address; City; State; Zip Code Sugar Land TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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: Sch: 11/13 Rpt: 26/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 10/10/2023	5 Payee name T-Mobile	
6 Amount (\$) \$89.59	7 Payee address; City; State; Zip Code Sugar Land TX 77479	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cellphone
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2023	Payee name T-Mobile	
Amount (\$) \$89.59	Payee address; City; State; Zip Code Sugar Land TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2023	Payee name T-Mobile	
Amount (\$) \$99.41	Payee address; City; State; Zip Code Sugar Land TX 77479	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/13 Rpt: 27/31	2 FILER NAME Watson, Teana	3 Filer ID
4 Date 07/17/2023	5 Payee name TGM Printing	
6 Amount (\$) \$270.63	7 Payee address; 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/20/2023	Payee name Thomas, Felecia	
Amount (\$) \$100.00	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense CWOP Christmas Gifts contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2023	Payee name Verizon Wrlds	
Amount (\$) \$135.30	Payee address; City; State; Zip Code TX	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense cell phone-final bill
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|--|-------------------------------|--------------------------------|--|
| Advertising Expense | 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: Sch: 13/13 Rpt: 28/31	2 FILER NAME Watson, Teana	3 Filer ID
--	--------------------------------------	-------------------

4 Date 10/10/2023	5 Payee name Wine Vibes
-----------------------------	-----------------------------------

6 Amount (\$) \$71.00	7 Payee address; City; State; Zip Code Missouri City, TX
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign team meeting
---------------------------------	--	---

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

Date 08/14/2023	Payee name product of society LLC
--------------------	--------------------------------------

Amount (\$) \$2,000.00	Payee address; City; State; Zip Code Houston, TX
---------------------------	---

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

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

--

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F4: Sch: 1/3 Rpt: 29/31	2 FILER NAME Watson, Teana	3 Filer ID
--	--------------------------------------	-------------------

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	-----------

5 Date 12/31/2023	6 Payee name Costco
-----------------------------	-------------------------------

7 Amount (\$) \$201.42	8 Payee address; City; State; Zip Code TX
----------------------------------	---

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) Transportation Equipment & Related Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Gas expense for attending events etc. around the county
----------------------------------	---	---

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

Date 12/01/2023	Payee name First Watch
---------------------------	----------------------------------

Amount (\$) \$203.82	Payee address; City; State; Zip Code 17412 W Grand Parkway Sugar Land , TX
--------------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
----------------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 6 months of campaign and office holder meetings
-------------------------------	--	---

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

--	--	--	--

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | 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: Sch: 2/3 Rpt: 30/31	2 FILER NAME Watson, Teana	3 Filer ID
--	--------------------------------------	-------------------

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	----

5 Date 12/01/2023	6 Payee name HEB
-----------------------------	----------------------------

7 Amount (\$) \$120.73	8 Payee address; City; State; Zip Code 530 Highway 6 Sugar Land , TX 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) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense flowers and gifts for sick and deceased constituents
----------------------------------	--	--

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

Date 12/31/2023	Payee name Walmart
--------------------	-----------------------

Amount (\$) \$105.31	Payee address; City; State; Zip Code 345 Highway 6 Sugar Land , TX 77478
-------------------------	--

TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
---------------------	--

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies and decor for fund raisers and campaign events
------------------------	--	---

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

--

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

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 -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | 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: Sch: 3/3 Rpt: 31/31	2 FILER NAME Watson, Teana	3 Filer ID
--	--------------------------------------	-------------------

4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
--	----

5 Date 12/01/2023	6 Payee name wix.com
-----------------------------	--------------------------------

7 Amount (\$) \$74.67	8 Payee address; City; State; Zip Code 500 Terry A. Francois Boulevard Sixth Fl. San Francisco , CA 94158
---------------------------------	---

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) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense monthly website support 24.89 x3
----------------------------------	--	--

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

--