FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00080005 73 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Kristen Brauchle NAME Date Received **ELECTRONICALLY FILED** 07/14/2023 NICKNAME LAST **SUFFIX** Hawkins CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; CITY; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** P.O. Box 66816 MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77266 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Ms. Amber J'Na NAME NICKNAME LAST **SUFFIX** Burton **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER** 77 Sugar Creek Blvd. **ADDRESS** Ste 600 (Residence or Business) Sugar Land, TX 77479 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (832) 326-7765 **PHONE** REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Day Month Day Year Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE District Judge District 11 Harris District Judge District 11

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

2 of 73

13 C / OH NAME	Hawkins, Kristen Bra		,	14 Filer ID 00080005	`	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditures n	accepted or political expenditured have been made without we be to report this information	the candidate's or off	iceholder's kn	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
_	GENERAL					
	_	COMMITTEE ADDRI	ESS			
	SPECIFIC					
		COMMITTEE CAMP	AIGN TREASURER NAME			
		COMMITTEE CAMP	AIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			ITRIBUTIONS(OTHER THAN ONTRIBUTIONS MADE ELE		s, \$	0.00
		ICAL CONTRIBUTI		0)	\$	114,523.06
EXPENDITURE TOTALS	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	0.00
	4. TOTAL POLIT	ICAL EXPENDITUR	RES		\$	34,572.94
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		MAINTAINED AS OF THE L	AST DAY OF THE	\$	204,074.32
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT						
		tru	swear, or affirm, under penalty ue and correct and includes a nder Title 15, Election Code.			
			The Honorable	e Kristen Brauchle	Hawkins	
		_	Signature of	Candidate or Officer	nolder	
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
of	, 20, to ce	ertify which, witness m	y hand and seal of office.			
Signature of office	cer administering oath	Printed name of	officer administering oath	Title of office	cer administer	ring oath

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

					3 of 73			
	18 FILER NAME Hawkins, Kristen Brauchle (The Honorable) 19 Filer ID (Ethics Commission Filers) 00080005							
20 SCH		SUBTOT	AL AMOUNT					
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	111,928.94			
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	2,594.12			
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$				
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	31,232.69			
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$				
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	3,340.25			
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$				
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	68.79			

	MONET	ARY POLITICAL	SCHEDULE A(J)1			
	The Instru	ction Guide explains h	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 1/36 Rpt: 4/73	
2	FILER NAME		LL-X		3 Filer ID (Ethics Commission Filers)	
		Hawkins, Kristen Brauchle (The Honorable)			00080005	
4	Date	5 Full name of contributor	out-of-state PAC (ID#:		7 Amount of Contribution (\$)	
	05/24/2023 Ahmad Zavitsanos Anaipakos Alavi & Mensing			\$5,000.00		
		6 Contributor address; City Houston, TX 77010-20				
Ļ	Caratuilar staula	l		O Constributorio Joh Titlo		
8	Contributor's	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any)	
12	If contributor i	s a child, law firm of parent(s)	(if any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	Amount of Contribution (\$)	
	05/30/2023	Amaro, James	Uni-oi-state PAC (ID#.	J	\$500.00	
	03/30/2023		Ctata, Zin Cada			
		Contributor address; City	; State; Zip Code			
		Houston, TX 77008-39	14			
	Contributor's	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)	
	Amaro Law	Firm				
	If contributor i	s a child, law firm of parent(s)	(if any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)	
	05/15/2023	Ammons, Rob	_		\$2,500.00	
		Contributor address; City	; State; Zip Code		···	
			·			
		Houston, TX 77006-46	24			
	Contributor's	Principal Occupation		Contributor's Job Title		
	Attorney	, ,		Attorney		
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)	
	Ammons La	w Firm				
	If contributor i	s a child, law firm of parent(s)	(if any)			

	MONET	ARY POLITICAL (SCHEDULE A(J)1				
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 2/36 Rpt: 5/73				
2	FILER NAME Hawkins, Kri	isten Brauchle (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00080005		
4	Date 06/12/2023			7 Amount of Contribution (\$) \$250.00			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u>I</u>		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if a	nny)				
Date Full name of contributor out-of-state PAC (ID#: O6/26/2023 Andrews Meyers Contributor address; City; State; Zip Code					Amount of Contribution (\$) \$500.00		
	Contributor's I	Houston, TX 77056-4175 Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	any)				
Date O6/05/2023 Full name of contributor out-of-state PAC (ID#: Arnold, Kurt Contributor address; City; State; Zip Code Houston, TX 77007-7007			Amount of Contribution (\$) \$5,000.00				
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
Contributor's employer/law firm Arnold & Itkin LLP Law firm of contributor's			Law firm of contributor's sp	pouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if a	any)				

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 3/36 Rpt: 6/73
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorab	ıle)		3	Filer ID (Ethics Commission Filers) 00080005
4	06/15/2023 Aziz, Muhammad 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$5,000.00		
_		Houston, TX 77002-170	<i>(</i>	I		
8		Principal Occupation		9 Contributor's Job Title		
10	Attorney	ampleyer/low firm		Attorney	2011	on (if any)
10		employer/law firm atkins Nichols Agosto Aziz &	Stogner	11 Law firm of contributor's sp	Jous	se (II arry)
12		s a child, law firm of parent(s) (if				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/31/2023	Baron, Lisa Contributor address; City; 9 Dallas, TX 75209-1501	State; Zip Code			\$500.00
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney	ттораг Собаралот		Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Baron and B	lue PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/06/2023 Barone, Mary Contributor address; City; State; Zip Code			\$100.00		
		Houston, TX 77005-1738	3			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u>. </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s 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.					Total pages Schedule A(J)1: Sch: 4/36 Rpt: 7/73		
2	FILER NAME Hawkins, Kri	NAME ins, Kristen Brauchle (The Honorable)			3	Filer ID (Ethics Commission Filers) 00080005		
4	Date 5 Full name of contributor out-of-state PAC (ID#:) 8 Barton Law Firm 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$250.00				
		Houston, TX 77007-542	9					
8	Contributor's I	Principal Occupation		9 Contributor's Job Title				
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)		
12	2 If contributor is	s a child, law firm of parent(s) (if	any)					
F	Date	Full name of contributor	out-of-state PAC (ID#:)	T	Amount of Contribution (\$)		
	Date Full Harrie of Contributor out-or-state PAC (ID#:) 06/05/2023 Beck Redden LLP Contributor address; City; State; Zip Code				\$1,000.00			
		Houston, TX 77010-202	9					
	Contributor's I	Principal Occupation		Contributor's Job Title				
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)		
	If contributor is	s a child, law firm of parent(s) (if	any)					
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)		
	05/31/2023	Bickham, Tom	_			\$500.00		
	Contributor address; City; State; Zip Code Houston, TX 77098-1722							
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>			
	Attorney			Attorney				
	Contributor's employer/law firm Law firm of contributor's s			oous	se (if any)			
	Bickham Lav	V						
	If contributor is	s a child, law firm of parent(s) (if	any)					

N	JONET	ARY POLITICAL (SCHEDULE A(J)1		
Т	he Instru	ction Guide explains hov	v to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 5/36 Rpt: 8/73
	FILER NAME Hawkins, Kristen Brauchle (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080005	
4 D				7 Amount of Contribution (\$) \$1,000.00	
		Corpus Christi, TX 78403	-2587		
8 C	ontributor's	Principal Occupation		9 Contributor's Job Title	•
Α	ttorney			Attorney	
	ontributor's aw Office	employer/law firm		11 Law firm of contributor's s	pouse (if any)
		s a child, law firm of parent(s) (if	any)		
	ate	Full name of contributor	out-of-state PAC (ID#:	1	Amount of Contribution (\$)
		Boundas, John	Out-of-State PAC (ID#.		\$1,000.00
06/06/2023 Boundas, John Contributor address; City; State; Zip Code			tate; Zip Code		
		Houston, TX 77024-3116			
С	ontributor's	Principal Occupation		Contributor's Job Title	•
Α	ttorney			Attorney	
	ontributor's Villiams Ha	employer/law firm		Law firm of contributor's s	pouse (if any)
		s a child, law firm of parent(s) (if	any)		
	ate	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
0	5/25/2023	Boutros, Stephen	_		\$1,000.00
Contributor address; City; State; Zip Code			•		
		Houston, TX 77056-1971			
		Principal Occupation		Contributor's Job Title	
Attorney Attorney Contributor's employer/law firm Law firm of contributor's s			nauga (if any)		
	tephen Bo			Law firm of contributor's s	pouse (ii ariy)
		s a child, law firm of parent(s) (if	any)	<u> </u>	

MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1	
The Instru	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 6/36 Rpt: 9/73		
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Hawkins, Kri	sten Brauchle (The Honorable)		00080005	
4 Date 06/26/2023 5 Full name of contributor out-of-state PAC (ID#: Bradley Arant Boult Cummings Texas PAC 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$1,000.00	
	Dallas, TX 75270-2107			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Contributor's 6	employer/law firm	11 Law firm of contributor's s	pouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
06/15/2023 Bryan, Sandy			\$250.00	
	Contributor address; City; State; Zip Code Houston, TX 77005-2004			
Contributor's F	Principal Occupation	Contributor's Job Title		
Continuator of	Tillopa Codapaton	Contributor o cos Titto		
Contributor's e	employer/law firm	Law firm of contributor's s	pouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#	#:)	Amount of Contribution (\$)	
06/07/2023	Callahan, Bryce		\$500.00	
	Contributor address; City; State; Zip Code			
	Houston, TX 77007-5037			
	Principal Occupation	Contributor's Job Title		
Attorney		Attorney		
Yetter Colen	employer/law firm	Law firm of contributor's s	pouse (if any)	
	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL (SCHEDULE A(J)1		
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 7/36 Rpt: 10/73		
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable	e)		3 Filer ID (Ethics Commission Filers) 00080005
4	Date 06/30/2023 Camp, Kevin G Contributor address; City; State; Zip Code Houston, TX 77055-4509 Time Table PAC (ID#:		7 Amount of Contribution (\$) \$500.00		
8	Contributor's I	I Principal Occupation		9 Contributor's Job Title	
	Attorney			Attorney	
10	Contributor's e	employer/law firm o PLLC		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if a	nny)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/07/2023 Cokinos Young Contributor address; City; State; Zip Code				\$250.00	
	Contributor's I	Houston, TX 77010 Principal Occupation		Contributor's Job Title	
	Contributor 5 i	molpai occupation		Contributor 3 dob Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if a	ny)	<u> </u>	
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
06/30/2023 Craft, Hunter Contributor address; City; State; Zip Code Houston, TX 77019-2100			\$1,000.00		
	Contributor's F	Principal Occupation		Contributor's Job Title	
Attorney			Attorney		
Contributor's employer/law firm Law firm of contributor's sp			pouse (if any)		
	Craft Law Fi	rm P.C.			
	If contributor is	s a child, law firm of parent(s) (if a	nny)		

	MONET	ARY POLITICAL CON	TRIBUTIC	ONS	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to co	1 Total pages Schedule A(J)1: Sch: 8/36 Rpt: 11/73				
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080005		
4	Date 5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$) \$1,000.00				
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title			
	Attorney			Attorney			
10	Contributor's e	employer/law firm Samperi		11 Law firm of contributor's sp	pouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out	of-state PAC (ID#:_)	Amount of Contribution (\$)		
Date Pull Harrie of Contributor State PAC (ID#:				\$500.00			
	Contributor's F	I Principal Occupation		Contributor's Job Title	_ I		
	Attorney			Attorney			
		employer/law firm		Law firm of contributor's sp	pouse (if any)		
	Davis Law G						
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out	of-state PAC (ID#:_)	Amount of Contribution (\$)		
	05/31/2023	De la Rosa, Oscar Contributor address; City; State; Zip Houston, TX 77056-2076) Code		\$250.00 		
	Contributor's I	Principal Occupation		Contributor's Job Title	I		
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)		ı			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A(J)1			
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 9/36 Rpt: 12/73				
2	FILER NAME				1	(Ethics Commission	n Filers)		
	Hawkins, Kr	awkins, Kristen Brauchle (The Honorable)			08000	005			
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amoun	t of Contribution (\$)			
	05/15/2023 Di Ferrante, Chris 6 Contributor address; City; State; Zip Code					\$250.00			
		Houston, TX 77008-470							
8	Contributor's	I Principal Occupation		9 Contributor's Job Title	1				
		, ,							
10	Contributor's	employer/law firm		11 Law firm of contributor's s	spouse (if any	<i>'</i>)			
12	! If contributor i	s a child, law firm of parent(s) (i	f any)						
-	Date	Full name of contributor	out-of-state PAC (ID#:)	Amoun	t of Contribution (\$)			
	05/15/2023	Drinnon, Rodney	sat or state () to (is mi				\$500.00		
		Contributor address; City;	State; Zip Code						
			·						
		Houston, TX 77027-374	4						
		Principal Occupation		Contributor's Job Title					
	Managing P			Attorney					
		employer/law firm		Law firm of contributor's s	spouse (if any	')			
	McCathern I		,						
	if contributor i	s a child, law firm of parent(s) (i	fany)						
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amoun	t of Contribution (\$)			
	06/07/2023	Fazal, Fermeen					\$100.00		
		Contributor address; City;	State; Zip Code						
		Bellaire, TX 77401-4602	2						
	Contributor's	Principal Occupation		Contributor's Job Title	•				
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any	')			
	If contributor i	s a child, law firm of parent(s) (i	f any)						

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1		
	The Instru	ction Guide explains how	1 Total pages Schedule A(J)1: Sch: 10/36 Rpt: 13/73				
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)		3 Filer ID (Ethics Commission Filers) 00080005		
4	Date 06/07/2023 Fernelius, Steve 6 Contributor address; City; State; Zip Code Houston, TX 77006-1908		7 Amount of Contribution (\$) \$250.00				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	1		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if ar	ny)				
Date O5/22/2023 Fibich, Tommy Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$1,000.00			
	Contributor's F	Houston, TX 77005-1848 Principal Occupation		Contributor's Job Title			
	Attorney	molpai eesapailen		Attorney			
	Fibich Leebr	employer/law firm on Copeland Briggs s a child, law firm of parent(s) (if ar	ıy)	Law firm of contributor's sp	pouse (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)		
O6/16/2023 Fleetwood, Michael Contributor address; City; State; Zip Code Lakewood, CO 80215-7043			\$150.00				
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if ar	ny)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.		ages Schedule A(J) 1/36 Rpt: 14/73	1:
2	FILER NAME Hawkins, Kri	isten Brauchle (The Honoral	ble)		3 Filer ID 000800	(Ethics Commiss	ion Filers)
4	Date 05/16/2023	5 Full name of contributor Fogler Brar O'Neil & Gra 6 Contributor address; City;	-		7 Amount	t of Contribution (\$)	\$1,000.00
Ļ	7 19 April	Houston, TX 77010-101	18	1- 0 . "			
8	Contributor's i	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	is a child, law firm of parent(s) (i	if any)	1			
	Date 06/29/2023	Full name of contributor Foley II, Taft Contributor address; City;	out-of-state PAC (ID#:		Amount	of Contribution (\$)	\$2,500.00
		Houston, TX 77054-130)1				
	Contributor's F Attorney	Principal Occupation		Contributor's Job Title Attorney			
		employer/law firm aw Firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	is a child, law firm of parent(s) (i	f any)				
	Date 06/13/2023	Full name of contributor Garcia, Juan Contributor address; City; Katy, TX 77494-4922	out-of-state PAC (ID#:		Amount	t of Contribution (\$)	\$1,000.00
	Contributor's	Principal Occupation		Contributor's Job Title	1		
	Attorney			Attorney	Cf		
	Johnson Ga	employer/law firm rcia LLP		Law firm of contributor's sp	oouse (IT any)	
		is a child, law firm of parent(s) (i	if any)	<u>.l</u>			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE	A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J Sch: 12/36 Rpt: 15/73)1:
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)		3 Filer ID (Ethics Commiss 00080005	sion Filers)
4	Date 06/30/2023	Full name of contributor Garcia, Michael Contributor address; City; Sta	out-of-state PAC (ID#:_ tte; Zip Code		7 Amount of Contribution (\$)	\$250.00
8	Contributor's I	Houston, TX 77096-4430 Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if a	ny)			
	Date O6/22/2023 Full name of contributor out-of-state PAC (ID#:) Garza, Chelsie King Contributor address; City; State; Zip Code Humble, TX 77396-3793			Amount of Contribution (\$)	\$100.00	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if a	ny)			
	Date O6/30/2023 Full name of contributor out-of-state PAC (ID#: Gederberg, Thomas Contributor address; City; State; Zip Code Houston, TX 77025-3815)	Amount of Contribution (\$)	\$25.00	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if ar	ny)			

	MONET	ARY POLITICAL (CONTRIBUTIO	DNS	SCHEDULE A(J)1		
	The Instru	ction Guide explains hov	v to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 13/36 Rpt: 16/73		
2	FILER NAME Hawkins, Kri	isten Brauchle (The Honorabl	e)		3 Filer ID (Ethics Commission Filers) 00080005		
4	Date 06/07/2023	 5 Full name of contributor Goolsby, Edward 6 Contributor address; City; S 	out-of-state PAC (ID#:_		7 Amount of Contribution (\$) \$100.00		
8	Contributor's I	Bellaire, TX 77401-3607 Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>			
	Date O6/06/2023 Full name of contributor out-of-state PAC (ID#: Gourrier, Joseph Contributor address; City; State; Zip Code Bellaire, TX 77401-2325				Amount of Contribution (\$) \$250.00		
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's e	employer/law firm		Law firm of contributor's sp	aw firm of contributor's spouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	any)				
	Date Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$) \$2,500.00			
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Attorney			Attorney			
		employer/law firm uss Attorney at Law		Law firm of contributor's sp	pouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if a	any)	•			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 14/36 Rpt: 17/73
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorab	ıle)		3	Filer ID (Ethics Commission Filers) 00080005
4	Date 05/16/2023	5 Full name of contributor Hadi, Husein6 Contributor address; City; \$			7	Amount of Contribution (\$) \$2,500.00
		Sugar Land, TX 77479-3	8822			
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's 6 The Hadi La	employer/law firm w Firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor i	s a child, law firm of parent(s) (if	any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2023	Hardin, Rusty Contributor address; City; \$				\$1,000.00
		Houston, TX 77005-3420) 			
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney Law firm of contributor's spouse (if any)		
		employer/law firm n & Associates		Law IIIII of Contributor's Sp	Jou:	se (II arry)
		s a child, law firm of parent(s) (if	any)			
	ii ooniinaator ii	o a orma, iaw iiiii or paroria(o) (ii	ca.iy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/06/2023	Hart, Jim				\$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77059-4410				•	
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Williams Ha	rt Boundas Easterby LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)	•		

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCH	HEDULE A	(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Sc Sch: 15/36 R		
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3 Filer ID (Ethio 00080005	s Commission	Filers)
4	Date 06/06/2023	5 Full name of contributor Havins, John 6 Contributor address; City; Sta	out-of-state PAC (ID#:_ ie; Zip Code		7 Amount of Con	tribution (\$)	\$250.00
8	Contributor's I	Houston, TX 77098-4051 Principal Occupation		9 Contributor's Job Title			
10	Contributor's 6	Contributor's employer/law firm 11 Law firm o			oouse (if any)		
12	! If contributor is	s a child, law firm of parent(s) (if an	y)				
	Date 06/14/2023 Full name of contributor out-of-state PAC (ID#:) Hawkins, Nina Contributor address; City; State; Zip Code Austin, TX 78704-6137			Amount of Con	tribution (\$)	\$100.00	
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's spouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if an	у)				
	Date Full name of contributor out-of-state PAC (ID#: 05/16/2023 Hawkins, Susan and Robert Contributor address; City; State; Zip Code Houston, TX 77005-3423)	Amount of Con	tribution (\$)	\$500.00	
	Contributor's Retired	Principal Occupation		Contributor's Job Title			
	Contributor's e	employer/law firm s a child, law firm of parent(s) (if an	у)	Law firm of contributor's sp	oouse (if any)		

	MONET	ARY POLITICAL CONTR	IBUTIO)NS		SCHEDULE A	۹(J)1
	The Instru	ction Guide explains how to compl	lete this f	orm.	1	Total pages Schedule A(J)1: Sch: 16/36 Rpt: 19/73	
2	FILER NAME Hawkins, Kri	isten Brauchle (The Honorable)			3	Filer ID (Ethics Commission 00080005	n Filers)
4	Date 05/31/2023	Haynes and Boone PAC 6 Contributor address; City; State; Zip Code	ate PAC (ID#:_ de		7	Amount of Contribution (\$)	\$1,000.00
8	Contributor's I	Richardson, TX 75082-4109 Principal Occupation		9 Contributor's Job Title			
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if any)					
	Date 05/17/2023	Henderson, Mary Contributor address; City; State; Zip Code	ate PAC (ID#:_)		Amount of Contribution (\$)	\$200.00
	Contributor's	Houston, TX 77005-3443 Principal Occupation		Contributor's Job Title	L		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	is a child, law firm of parent(s) (if any)					
F	Date	Full name of contributor out-of-sta	ate PAC (ID#:_)	Π	Amount of Contribution (\$)	
	06/29/2023	Herbert, Kyle Contributor address; City; State; Zip Code Houston, TX 77046-3408	le				\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title			
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL CONTR	RIBUTIC	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to comp	plete this f	orm.	1	ages Schedule A(J)1 7/36 Rpt: 20/73	l:
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3 Filer ID 000800	(Ethics Commissi	on Filers)
4	Date 06/24/2023	 5 Full name of contributor out-of-s Hernandez, Ana 6 Contributor address; City; State; Zip Co Houston, TX 77251-1287 	tate PAC (ID#:_		7 Amount	t of Contribution (\$)	\$1,000.00
8	Contributor's F	rincipal Occupation		9 Contributor's Job Title	1		
	State Repres	sentative		State Representative			
10	Contributor's of State of Tex	employer/law firm as		11 Law firm of contributor's sp	oouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)		L			
	Date	Full name of contributor out-of-s	tate PAC (ID#:_)	Amount	t of Contribution (\$)	
	06/14/2023	Hernandez, Rolando Contributor address; City; State; Zip Co Houston, TX 77266-6246	de				\$20.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	l .		
		·					
	Contributor's e	employer/law firm		Law firm of contributor's spouse (if any)			
	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-s	tate PAC (ID#:_)	Amount	t of Contribution (\$)	
	Date Full name of contributor out-of-state PAC (ID#:) 05/31/2023 Hicks Thomas Contributor address; City; State; Zip Code Houston, TX 77002-2723						\$500.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)		L			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 18/36 Rpt: 21/73
2	FILER NAME Hawkins, Kr	isten Brauchle (The Honoral	ole)		3	Filer ID (Ethics Commission Filers) 00080005
4	Date 06/14/2023	Full name of contributor Hoffer, StewartContributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$150.00
		Bellaire, TX 77401-4822		1		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	06/30/2023	Horne Rota Moos LLP Contributor address; City;	<u> </u>			\$250.00
		Houston, TX 77019-214	1			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor i	s a child, law firm of parent(s) (i	any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/23/2023	Horowitz, Daniel Contributor address; City;	State; Zip Code			\$500.00
		Houston, TX 77002-876	9			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	The Law Off	ice of Daniel D. Horowitz III	PC			
	If contributor i	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIB	BUTIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complet	e this form.	1 Total pages Schedule A(J)1: Sch: 19/36 Rpt: 22/73
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Hawkins, Kr	isten Brauchle (The Honorable)		00080005
4	Date	5 Full name of contributor out-of-state F	PAC (ID#:)	7 Amount of Contribution (\$)
	06/15/2023	Husain, Nomaan		\$5,000.00
		6 Contributor address; City; State; Zip Code		
		Houston, TX 77057-5650		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Attorney	
10	Contributor's	employer/law firm	11 Law firm of contributor's	spouse (if any)
	Husain Law			
12	! If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
	06/27/2023	Irelan, Bradford		\$500.00
		Contributor address; City; State; Zip Code		
		Houston TV 77004 1000		
	Cantuibustaula	Houston, TX 77004-1000	Contributorio Joh Titlo	
	Attorney	Principal Occupation	Contributor's Job Title Attorney	
			-	and the second
	Irelan McDa	employer/law firm	Law firm of contributor's	spouse (ii ariy)
	ii contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state F	PAC (ID#:)	Amount of Contribution (\$)
	06/05/2023	Itkin, Jason		\$5,000.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77007-7007		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's	spouse (if any)
	Arnold & Itki	n LLP		
	If contributor i	s a child, law firm of parent(s) (if any)	<u>'</u>	

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how	v to complete this	form.	1	Total pages Schedule A(J)1: Sch: 20/36 Rpt: 23/73
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorab	e)		3	Filer ID (Ethics Commission Filers) 00080005
4	Date 06/29/2023	5 Full name of contributor Khawaja, Omar6 Contributor address; City; S	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		Houston, TX 77077-1486	j			
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm of Omar khawaja		11 Law firm of contributor's sp	oous	ee (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/17/2023	Kirkpatrick, Eric Contributor address; City; S				\$1,000.00
		Houston, TX 77027-5904		T		
		Principal Occupation		Contributor's Job Title Attorney		
_	Attorney	employer/law firm		Law firm of contributor's spouse (if any)		
	Kirkpatrick L			Law littl of contributors sp	Jous	e (II ally)
_	•	s a child, law firm of parent(s) (if	anv)			
			,			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/07/2023	Kishinevsky, Leo	•			\$200.00
		Contributor address; City; S Houston, TX 77080-4510				
-	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	l		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 21/36 Rpt: 24/73	
2	FILER NAME Hawkins, Kr	isten Brauchle (The Honorab	le)		3	Filer ID (Ethics Commission Filers) 00080005	
4	Date 06/30/2023	5 Full name of contributor Knapp, Mary6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$100.00	
		Houston, TX 77005-2150)				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title			
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)	
12	! If contributor i	s a child, law firm of parent(s) (if	any)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	05/27/2023	Kretzer, Seth Contributor address; City; S				\$250.00	
		Houston, TX 77002-1059	9				
	Contributor's Principal Occupation			Contributor's Job Title			
	Attorney			Attorney Law firm of contributor's spouse (if any)			
		employer/law firm of Seth Kretzer		Law IIIII of Contributor's Spouse (if arry)			
		s a child, law firm of parent(s) (if	anv)				
	ii continuator i	o a orma, law mm or paremillo, (ii	uily)				
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/06/2023	Kretzer, Seth				\$250.00	
		Contributor address; City; S Houston, TX 77002-1059					
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	Principal Occupation		Attorney			
		employer/law firm		Law firm of contributor's sp	าดน	se (if any)	
		of Seth Kretzer				(, ,	
	If contributor i	s a child, law firm of parent(s) (if	any)				

	MONET	TARY POLITICAL CONTRIBU	JTIC	ONS		SCHEDULE A	(J)1
	The Instru	ction Guide explains how to complete t	this f	form.	1	Total pages Schedule A(J)1: Sch: 22/36 Rpt: 25/73	
2	FILER NAME Hawkins, Kri	isten Brauchle (The Honorable)			3	Filer ID (Ethics Commission 00080005	Filers)
4	Date 06/05/2023	 Full name of contributor out-of-state PAC LeRoy, Tracy Contributor address; City; State; Zip Code) (ID#:_)	7	Amount of Contribution (\$)	\$250.00
R	Contributor's	Houston, TX 77024-4701 Principal Occupation		9 Contributor's Job Title	<u>L</u>		
U	Continuator 5 .	-ппора оссиранот		5 Continuator 3 305 Trac			
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	se (if any)	
12	If contributor is	is a child, law firm of parent(s) (if any)		1			
	Date	Full name of contributor out-of-state PAC	C (ID#:		\overline{T}	Amount of Contribution (\$)	
	06/06/2023	D6/06/2023 Leach & Minnick P.C. Contributor address; City; State; Zip Code					\$500.00
	5 . 9 .a.d.	Houston, TX 77098-2033		T a second to the time	\perp		
		Principal Occupation		Contributor's Job Title			
		employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	is a child, law firm of parent(s) (if any)					
	Date	Full name of contributor ut-of-state PAC	C (ID#:)	Ī	Amount of Contribution (\$)	
	06/26/2023	Lowenberg Law Firm PLLC				\$	5,000.00
		Contributor address; City; State; Zip Code Houston, TX 77056-5330					
	Contributor's F	Principal Occupation		Contributor's Job Title	<u></u>		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	ous	se (if any)	
	If contributor is	is a child, law firm of parent(s) (if any)		1			

	MONET	ARY POLITICAL CON	ITRIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to c	omplete this f	orm.	1	ages Schedule A(J)1: B/36 Rpt: 26/73	
2	FILER NAME Hawkins, Kr	isten Brauchle (The Honorable)			3 Filer ID 000800	(Ethics Commissio	n Filers)
4	Date 05/15/2023	 5 Full name of contributor ou Manji, Abel 6 Contributor address; City; State; Zi Sugar Land, TX 77479-4875 	t-of-state PAC (ID#:_ p Code)	7 Amount	of Contribution (\$)	\$500.00
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>		
	Attorney	orney Attorney					
10	O Contributor's employer/law firm Hird Chu & Lawji PLLC 11 Law firm of contributor's spo		oouse (if any))			
12	If contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor ou	t-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	06/07/2023	Marcum, Gregory Contributor address; City; State; Zi Houston, TX 77046-0102					\$150.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Continuator 3 i	тіпоры Оссаршоп		Contributor 3 005 Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any))	
	If contributor i	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor ou	t-of-state PAC (ID#:_)	Amount	of Contribution (\$)	
	06/07/2023	Matias J Adrogue PLLC Contributor address; City; State; Zi Houston, TX 77006-4101	p Code				\$250.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any))	
	If contributor i	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how t	o complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 24/36 Rpt: 27/73
2	FILER NAME Hawkins, Kri	isten Brauchle (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080005
4	Date 06/30/2023			7 Amount of Contribution (\$) \$200.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	1
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any	y)		
	Date Full name of contributor out-of-state PAC (ID#:) McMillan Law Firm PLLC Contributor address; City; State; Zip Code Houston, TX 77002-6324			Amount of Contribution (\$) \$5,000.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if an	у)		
	Date 05/15/2023	Full name of contributor Meyn, Anne Contributor address; City; Stat Houston, TX 77005-2735	out-of-state PAC (ID#:_ e; Zip Code		Amount of Contribution (\$) \$100.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if an	y)		

	MONET	ARY POLITICAL CONTRIE	BUTIC	ONS		SCHEDULE A(J)1	
	The Instru	ction Guide explains how to complet	e this f	orm.	1	Total pages Schedule A(J)1: Sch: 25/36 Rpt: 28/73	=
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3	Filer ID (Ethics Commission Filers) 00080005	
4	Date 06/06/2023			7	Amount of Contribution (\$) \$250.0	–	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	<u> </u>		_
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	ous	e (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if any)					_
	Date 06/07/2023	Full name of contributor out-of-state F Northcutt, Frances Contributor address; City; State; Zip Code Houston, TX 77027-5832	PAC (ID#:_)		Amount of Contribution (\$) \$50.0	=
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	e (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)					_
	Date 06/28/2023	Full name of contributor out-of-state FOROurke, Sean Contributor address; City; State; Zip Code Galveston, TX 77554-1100	PAC (ID#:_)		Amount of Contribution (\$) \$250.0	=
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>		_
	Contributor's e	employer/law firm		Law firm of contributor's sp	ous	e (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)					
							_

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 26/36 Rpt: 29/73	
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable))		3 Filer ID (Ethics Commission Filers) 00080005	
4	Date 06/30/2023			7 Amount of Contribution (\$) \$250.	- 00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	spouse (if any)	
12	! If contributor is	s a child, law firm of parent(s) (if ar	ny)			
	Date 06/30/2023	Full name of contributor Patterson, Pete Contributor address; City; Sta Houston, TX 77006-5857	out-of-state PAC (ID#:_ te; Zip Code		Amount of Contribution (\$)	— 30
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if ar	ıy)			
	Date 06/26/2023	Full name of contributor Porter Hedges LLP Contributor address; City; Sta Houston, TX 77002-6341	out-of-state PAC (ID#:_ te; Zip Code)	Amount of Contribution (\$) \$1,000.	—
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Contributor's e	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if ar	ıy)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 27/36 Rpt: 30/73
2	FILER NAME Hawkins, Kr	sten Brauchle (The Honorab	ole)		3	Filer ID (Ethics Commission Filers) 00080005
4	Date 05/30/2023	5 Full name of contributor Rapp & Krock PC6 Contributor address; City; \$	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		Houston, TX 77056-3970	0			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	ī	Amount of Contribution (\$)
	06/14/2023	Ray, Jeff Contributor address; City; \$				\$1,000.00
		San Antonio, TX 78212-	1750	T - "		
		Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		(1)
		employer/law firm cChristian PC		Law firm of contributor's sp	oous	se (IT any)
	if contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/29/2023	Reed Smith LLP				\$500.00
		Contributor address; City; s Houston, TX 77002-611	·		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributors	Tincipal Occupation		Contributor 3 30b Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor i	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 28/36 Rpt: 31/73
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080005
4	Date 06/07/2023			7 Amount of Contribution (\$) \$250.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title	1
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if an	y)		
	Date 05/31/2023	Full name of contributor Roberts Markland LLP Contributor address; City; Star Houston, TX 77004-7604	out-of-state PAC (ID#:_ le; Zip Code		Amount of Contribution (\$) \$5,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Contributor's	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if an	у)		
	Date 06/30/2023	Full name of contributor Robin Young & Company Contributor address; City; Star Houston, TX 77056-1734	out-of-state PAC (ID#:_ e; Zip Code)	Amount of Contribution (\$)
	Contributor's I	I Principal Occupation		Contributor's Job Title	1
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if an	у)	L	

	MONET	ARY POLITICAL CONTR	IBUTIC	ONS	SCHEDULE A(J)1	
	The Instru	ction Guide explains how to compl	ete this f	orm.	1 Total pages Schedule A(J)1: Sch: 29/36 Rpt: 32/73	
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080005	
4	Date 05/15/2023			7 Amount of Contribution (\$) \$100.	00	
8	Contributor's F	Houston, TX 77005-1654 Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp		spouse (if any)			
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-sta	te PAC (ID#:_)	Amount of Contribution (\$)	_
	05/22/2023 Sheehy Ware & Pappas Contributor address; City; State; Zip Code Houston, TX 77010-1008				\$1,000.	00
	Contributor's F	Principal Occupation		Contributor's Job Title		
		opa Ossapano.				
	Contributor's 6	employer/law firm		Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)		<u> </u>		
	Date	Full name of contributor out-of-sta	te PAC (ID#:_)	Amount of Contribution (\$)	_
	06/07/2023	Smith, Mark Contributor address; City; State; Zip Code Houston, TX 77098-1134	e		\$500.	OC
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	spouse (if any)	
	BakerHostet					
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CONTRI	BUTIC	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to compl	ete this f	orm.	ı	Total pages Schedule A(J)1: Sch: 30/36 Rpt: 33/73
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			ı	Filer ID (Ethics Commission Filers) 00080005
4	Date 05/22/2023			7	Amount of Contribution (\$) \$250.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	ouse	e (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date O6/30/2023 Full name of contributor out-of-state PAC (ID#: Sorola-Pohlman, Lenora Contributor address; City; State; Zip Code Houston, TX 77008-3049				Amount of Contribution (\$) \$25.00	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	ouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date 06/30/2023	Full name of contributor out-of-state Sorrels, Randall Contributor address; City; State; Zip Code	e PAC (ID#:_			Amount of Contribution (\$) \$1,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's e Sorrels Law	employer/law firm		Law firm of contributor's sp	ouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CO	ONTRIBUTIO	ONS	SCHEDULE A(J)	L
	The Instru	ction Guide explains how t	o complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 31/36 Rpt: 34/73	
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3 Filer ID (Ethics Commission Filers 00080005	;)
4	Date 06/05/2023	5 Full name of contributorSpagnoletti, Marcus6 Contributor address; City; StateHouston, TX 77002-1629	out-of-state PAC (ID#:_ e; Zip Code		7 Amount of Contribution (\$) \$5,00	0.00
8	Contributor's F	Principal Occupation		9 Contributor's Job Title		
	Attorney	ney Attorney				
10	O Contributor's employer/law firm Spagnoletti Law Firm 11 Law firm of contributor's spo		pouse (if any)			
12	If contributor is	s a child, law firm of parent(s) (if any	<i>(</i>)			
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount of Contribution (\$)	
	05/24/2023	Spurlock, Kim Contributor address; City; State Humble, TX 77346-3478	e; Zip Code		 \$1,00	0.00
	Contributor's F	<u>I</u> Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	pouse (if any)	
	The Spurloc					
		s a child, law firm of parent(s) (if any	/)			
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount of Contribution (\$)	
	06/27/2023	Stewart J. Guss & Associate	es		\$55	8.94
		Contributor address; City; State Houston, TX 77070	e; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any	()			

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHE	DULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Sched Sch: 32/36 Rpt:	
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable))		3 Filer ID (Ethics C	Commission Filers)
4	Date 05/15/2023			7 Amount of Contrib	s250.00	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	0 Contributor's employer/law firm 11 Law firm of contributor's spo		pouse (if any)			
12	! If contributor is	s a child, law firm of parent(s) (if ar	y)			
	Date O6/14/2023 Full name of contributor out-of-state PAC (ID#:			Amount of Contrib	s250.00	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if ar	iy)			
	Date 05/31/2023	Full name of contributor Talbot, Eva Contributor address; City; Sta Houston, TX 77035-5002	out-of-state PAC (ID#:_ te; Zip Code		Amount of Contrib	s500.00
		Principal Occupation		Contributor's Job Title	l	
	Retired Contributor's 6	employer/law firm		N/A Law firm of contributor's sp	oouse (if anv)	
	Retired	s a child, law firm of parent(s) (if ar	nv)		ocaco (i. ai.y)	
	ii contributor i	o a omia, iaw iiiii oi paleiii(s) (ii al	, (tr			

	MONET	TARY POLITICAL CONTRIBUTION)NS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to complete this f	orm.		ges Schedule A(J)1 /36 Rpt: 36/73	.:
2	FILER NAME Hawkins, Kri	isten Brauchle (The Honorable)		3 Filer ID 0008000	(Ethics Commission)	on Filers)
4	Date 06/07/2023	 Full name of contributor out-of-state PAC (ID#:_ The Buchanan Law Office P.C. Contributor address; City; State; Zip Code 		7 Amount o	of Contribution (\$)	\$250.00
		Houston, TX 77059	·			
8	Contributor's F	Principal Occupation	9 Contributor's Job Title			
10	Contributor's 6	employer/law firm	11 Law firm of contributor's sp	oouse (if any)		
12	! If contributor is	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_		Amount o	of Contribution (\$)	
	06/07/2023 The Kruckemeyer Law Firm Contributor address; City; State; Zip Code			_		\$300.00
_		Houston, TX 77007-8155	T	<u> </u>		
		Principal Occupation	Contributor's Job Title			
	Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)		
	If contributor is	is a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_)	Amount o	of Contribution (\$)	
	06/07/2023	Thompson Coe Cousins & Iron LLP Contributor address; City; State; Zip Code Dallas, TX 75201-2824				\$1,000.00
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's 6	employer/law firm	Law firm of contributor's sp	oouse (if any)		
	If contributor is	is a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CON	SCHEDULE A(J)1			
	The Instru	ction Guide explains how to c	complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 34/36 Rpt: 37/73	_
2	FILER NAME Hawkins, Kri	sten Brauchle (The Honorable)			3 Filer ID (Ethics Commission Filers) 00080005	
4	Date 06/28/2023	 5 Full name of contributor o Tilton, Michael 6 Contributor address; City; State; Z Houston, TX 77004-5855 		7 Amount of Contribution (\$) \$250.0	0	
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	spouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)				
Date Full name of contributor out-of-state PAC (ID 06/30/2023 Vuong, David Contributor address; City; State; Zip Code		ut-of-state PAC (ID#:_ ip Code		Amount of Contribution (\$) \$100.0	0	
		Houston, TX 77082-2212				
	Attorney	Principal Occupation		Contributor's Job Title Attorney		
				Law firm of contributor's sp	spouse (if any)	
	Date	Full name of contributor \square_0	ut-of-state PAC (ID#:_	,	Amount of Contribution (\$)	_
	05/24/2023	Walker & Hunter PC Contributor address; City; State; Z Houston, TX 77027-5904			\$1,000.0	·O
	Contributor's I	Principal Occupation		Contributor's Job Title	1	
Contributor's employer/law firm				Law firm of contributor's sp	spouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL CONTRIBUT	IONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A(J)1: Sch: 35/36 Rpt: 38/73
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Hawkins, Kr	isten Brauchle (The Honorable)		00080005
4	Date	5 Full name of contributor ut-of-state PAC (ID	D#:)	7 Amount of Contribution (\$)
	06/02/2023	Webster, Jason		\$1,000.00
		6 Contributor address; City; State; Zip Code		
		Houston, TX 77036-3320		
8	Contributor's	Principal Occupation	•	
	Attorney		Attorney	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
	Self			
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
	05/31/2023	West, S. Scott		\$5,000.00
		Contributor address; City; State; Zip Code		··· <mark> </mark>
		Sugar Land, TX 77479-4922		
	Contributor's	T Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	The West La	aw Firm		
	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution (\$)
	06/05/2023	Wexler, Noah		\$500.00
		Contributor address; City; State; Zip Code		··· <mark> </mark>
		Houston, TX 77007-7035		
_	Contributor's	I Principal Occupation	Contributor's Job Title	
	Attorney		Attorney	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	Arnold & Itki	n LLP		
	If contributor i	s a child, law firm of parent(s) (if any)		
H				

	MONET	ARY POLITICAL	CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	orm.	1	Total pages Schedule A(J)1: Sch: 36/36 Rpt: 39/73	
2	FILER NAME Hawkins, Kr	FILER NAME Hawkins, Kristen Brauchle (The Honorable)				Filer ID (Ethics Commission Filers) 00080005
4	Date 05/16/2023	5 Full name of contributor out-of-state PAC (ID#:)				Amount of Contribution (\$) \$1,000.00
		Houston, TX 77002-612	5			
8	Contributor's Principal Occupation 9 Contributor's Job Title					
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse	e (if any)
12	If contributor i	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	05/22/2023	Yetter, Paul	_			\$750.00
		Contributor address; City; Spring, TX 77379-7571	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's	employer/law firm		Law firm of contributor's s	pouse	e (if any)
	Yetter Colen	nan LLC				
	If contributor i	s a child, law firm of parent(s) (if	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)
	06/28/2023	Zehl, Ryan				\$5,000.00
		Contributor address; City; Houston, TX 77024-370	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	'	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's s	pouse	e (if any)
	Zehl & Asso					
	If contributor i	s a child, law firm of parent(s) (i	fany)			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 40/73 3 Filer ID (Ethics Commission Filers) FILER NAME Hawkins, Kristen Brauchle (The Honorable) 00080005 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 06/07/2023 Avram Blair & Associates P.C. \$2,005.48 Kickoff event catering. 7 Contributor address; City; State; Zip Code Bellaire, TX 77401-2339 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 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 Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 06/29/2023 Stewart J. Guss & Associates \$588.64 I Event expenses Contributor address; City; State; Zip Code Houston, TX 77070 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) 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)

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica				
	Credit Card Payment	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
	Sch: 1/23 Rpt: 41/73	Hawkins, Kristen Brauchle (The Honorable) 00080005			
4	Date	5 Payee name	_		
	01/27/2023	AT&T Conference Center			
6	Amount (\$)	7 Payee address; City; State; Zip Code	-		
	\$372.48	1900 University Ave.			
		Austin, TX 78705			
8	PURPOSE		_		
0	OF	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (b) Description Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Check if Austin, TX, officeholder living expense			
		Hotel for conference			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			
	Date	Payee name			
	01/30/2023	AT&T Conference Center			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$328.31	1900 University Ave.			
		Austin, TX 78705			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_		
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.			
	EXI ENDITORE	Check if Austin, TX, officeholder living expense			
		Hotel for conference			
	Complete ONLY if direct	Constitute (Office helds a name Office accords	_		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
			=		
	Date	Payee name			
	06/12/2023	Area 5 Democrats			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$250.00	P.O. Box 608			
		Pasadena, TX 77501			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Candidate/Officeholder/Political Committee			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-		
	expenditure to benefit C/OI				
			_		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/23 Rpt: 42/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	04/24/2023	Bloomberg
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$415.00	731 Lexington Avenue
		New York, NY 10022
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/03/2023	BlueHost
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.25	10 Corporate Drive
		Burlington, MA 01803
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		website domain hosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
	Date	Payee name
	02/03/2023	BlueHost
	Amount (\$)	Payee address; City; State; Zip Code
	\$4.25	10 Corporate Drive
	*	
		Burlington, MA 01803
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		website domain hosting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
		· · · · · · · · · · · · · · · · · · ·	_
1	Total pages Schedule F1:		
	Sch: 3/23 Rpt: 43/73	Hawkins, Kristen Brauchle (The Honorable) 00080005	_
4	Date	5 Payee name	
	03/03/2023	BlueHost	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$4.25	10 Corporate Drive	
		Burlington, MA 01803	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		website domain hosting	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	04/03/2023	BlueHost	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4.25	10 Corporate Drive	
		Burlington, MA 01803	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		website domain hosting	
		website domain nosting	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·	
\vdash	Date	Payer name	=
	04/26/2023	Payee name BlueHost	
_			_
	Amount (\$)	Payee address; City; State; Zip Code	ľ
	\$242.33	10 Corporate Drive	ľ
		Burlington, MA 01803	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		website domain hosting	
		website domain nosting	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/O		
			-

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Cabadula E4:	
1	Total pages Schedule F1: Sch: 4/23 Rpt: 44/73	2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) 3 Filer ID (Ethics Commission Filers) 00080005
4	Date	5 Payee name
	01/30/2023	Brooks IT Services
6	Amount (\$) \$64.95	7 Payee address; City; State; Zip Code PO Box 926202 Houston, TX 77292
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign IT
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/28/2023	Brooks IT Services
	Amount (\$) \$64.95	Payee address; City; State; Zip Code PO Box 926202
		Houston, TX 77292
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign IT
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/06/2023	Brooks IT Services
	Amount (\$) \$125.00	Payee address; City; State; Zip Code PO Box 926202
		Houston, TX 77292
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign IT
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
1	Sch: 5/23 Rpt: 45/73	2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) 3 Filer ID (Ethics Commission Filers) 00080005
4	Date	5 Payee name
	03/29/2023	Brooks IT Services
6	Amount (\$) \$64.95	7 Payee address; City; State; Zip Code PO Box 926202 Houston, TX 77292
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense Campaign IT
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/01/2023	Brooks IT Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$66.47	PO Box 926202
	DUPPOS	Houston, TX 77292
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign IT
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/20/2023	Brooks IT Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$61.40	PO Box 926202
		Houston, TX 77292
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign IT
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	Sa		iges	/Contract Labor		OTHER (enter	a category not listed a	above)
	oroun oura'r aymone			The Instruction Gu	ıide explains how	to com	ıple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 6/23 Rpt: 46/73		Hawkins, Kr	isten Brauchle (The Honorable	e)				00080005		
4	Date	5	Payee name									
	06/07/2023		Campaign V	Varriors								
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Cod	le					
	\$750.00		14237 E. Sa	am Houston Par	kway N.							
			Suite 200									
			Houston, TX	(77044								
8	PURPOSE	(a)	Category	e Categories listed at the		_, (h)	Description				
ľ	OF	(")	Consulting E		ne top of this schedule	e) (.~,	_ `	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Consuming E	-xperioe				Check if Austin	, TX,	officeholder livir	ig expense	
								Consulting fe	e			
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	e soug	ht			Office h	ield	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	06/06/2023		Cardona, Ja	ımes								
	Amount (\$)		Payee addres	ss; City;	State; Z	ip Cod	le					
	\$2,000.00		5216 Leelar	nd St.								
			Houston, TX	(77023								
	PURPOSE	(a)	Category (Se	e Categories listed at the	ne top of this schedule	e) ((b)	Description				
	OF EXPENDITURE		Fees	g		-,		Check if travel	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITORE							—		officeholder livir	ig expense	
								Consulting Fe	ee			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Offic	e sougl	ht			Office h	ield	
	- CAPOTICITO TO BOTTOTIC GAOT											
	Date		Payee name									
	06/02/2023		Cardona, Ja	ımes								
	Amount (\$)		Payee addres	ss; City;	State; Z	ip Cod	le					
	\$2,000.00		5216 Leelar	nd St.								
			Houston, TX	K 77023								
	PURPOSE	(a)	Category (Se	e Categories listed at the	ne top of this schedule	e) ((b)	Description				
	OF EXPENDITURE		Fees					므			mplete Schedule T.	
	EXI ENDITORE									officeholder livir	ig expense	
								Consulting Fe	ee			
_	Complete ONLY if allower	Ļ	Condidate /Off	acholder res	Otr.	0.000	b.			O#: !	ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Januidatė/Offic	ceholder name	Offic	e sougl	ΠŢ			Office h	ieiū	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(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

	Candidate/Officeholder/Politica Credit Card Payment	I 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/23 Rpt: 47/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	06/01/2023	Cardona, James
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	5216 Leeland St.
		Houston, TX 77023
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Consulting Fee
		Consuming 1 cc
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
_		
	Date	Payee name
	01/11/2023	Cardona, James
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5216 Leeland St.
		Houston, TX 77023
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Consulting Fee
		Consuming 1 cc
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/12/2023	Cardona, James
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	5216 Leeland St.
		Houston, TX 77023
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		Consulting Fee
_	Operation ONE VIII II	Orandidate (Office leaded as a sure
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 2 25 3/01	
L		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/23 Rpt: 48/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	06/12/2023	Cardona, James
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$562.44	5216 Leeland St.
		Houston, TX 77023
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Consulting Fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/26/2023	Cedar & Spokes
	Amount (\$)	Payee address; City; State; Zip Code
	\$9.56	2125 Western Ave #100
		Seattle, WA 98121
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		meal during conference
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	02/06/2023	Curb Mobility LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.20	11-11 34th Ave
		Queens, NY 11116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Taxi in New Orleans during CLE
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/23 Rpt: 49/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	04/14/2023	Firehouse Subs
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$227.00	2702 Yale St
		Houston, TX 77008
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		High school mock trial tournament
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
_	Date	Payee name
	03/09/2023	Franks Pizza
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.00	417 Travis St
	410.00	11 Havio ot
		Houston, TX 77002-1807
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Food for Jury
		1 ood for oary
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payon namo
	03/03/2023	Payee name Grammarly
	Amount (\$) \$153.50	Payee address; City; State; Zip Code 548 Market Street
	φ103.50	546 Market Street
		San Francisco, CA 94104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Software
		Software
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment						
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers	s)				
	Sch: 10/23 Rpt: 50/73	Hawkins, Kristen Brauchle (The Honorable) 00080005					
4	Date	5 Payee name					
	03/10/2023	HOUSTON BAR FOUNDATION					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$2,600.00	1111 Bagby St					
		Ste 200					
		Houston, TX 77002					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By					
		Candidate/Officeholder/Political Committee					
		Donation					
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held OH					
	Date	Payee name					
	06/29/2023	HOUSTON BAR FOUNDATION					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$260.00	1111 Bagby St					
		Ste 200					
		Houston, TX 77002					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations Made By					
		Candidate/Officeholder/Political Committee					
		Donation					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
	Date	Payee name					
	05/31/2023	Hawkins, Kristen (Judge)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$3,340.25	PO Box 66816					
		Houston, TX 77266-6816					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense					
		Travel expenses					
_	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held					
	Complete ONLY if direct expenditure to benefit C/OH	•					

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services The Instruction Guide	Salaries/V	/ages	/Contract Labor		OTHER (enter a	category not listed a	above)
_		I		explains now to co	IIIpic	te tills form.	-			
1	Total pages Schedule F1:						3	Filer ID	(Ethics Commis	ssion Filers)
	Sch: 11/23 Rpt: 51/73	Hawkins, k	(risten Brauchle (The	e Honorable)				00080005		
4	Date	5 Payee name)							
	06/23/2023	Herkimer C								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	do					
o	` '	1	•	State, Zip Co	ue					
	\$10.10	2101 4th A	ve							
		Seattle, W	A 98121							
8	PURPOSE	(a) Category (s	See Categories listed at the top	on of this schedule)	(b)	Description				
	OF	I	rage Expense	of this schedule)	` ,		outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE		.e.go =/\poi.oo			Check if Austin	, TX	, officeholder living	g expense	
						Meal during of	con	ference		
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	aht			Office he	eld	
	expenditure to benefit C/OI				9					
		ī								
	Date	Payee name								
	02/28/2023	Houston B	ar Association							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$250.00	1111 Bagb	y St							
		Ste 200								
			V 77002 2502							
		Houston, i	X 77002-2592							
	PURPOSE		See Categories listed at the top		(b)	Description				
	OF EXPENDITURE		ns/Donations Made			=			plete Schedule T.	
		Candidate/Officeholder/Political Committee			l —			, officeholder living	g expense	
						Donation, Pri	ae	mixer		
	Complete ONLY if direct		ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	н								
	Date	Payee name	1							
	01/30/2023	1 1	ar Sections							
				State: 7in Co	do					
	Amount (\$)	Payee addre	•	State; Zip Co	ue					
	\$10.00	1111 Bagb	У							
		FLB 200								
		Houston, T	X 77002							
	PURPOSE	(a) Category (s	See Categories listed at the top	on of this schedule)	(b)	Description				
	OF	Fees	see categories isseed at the top	of this schedule)	` ,		outs	ide of Texas. Com	plete Schedule T.	
	EXPENDITURE	' 000				Check if Austin	, TX	, officeholder living	g expense	
						CLE event				
	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI			55 554	J			200 110	-	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Lead Services Salaries/Wages/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/23 Rpt: 52/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	06/20/2023	Houston LGBT Caucus PAC
6	Amount (\$) \$40.00	7 Payee address; City; State; Zip Code PO Box 66664 Houston, TX 77266-6664
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Г	Date	Payee name
	03/06/2023	Houston Lawyers Association Foundation
	Amount (\$) \$500.00	Payee address; City; State; Zip Code PO Box 300009 Houston, TX 77230-0009
Г	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/01/2023	Houston Lawyers Association Foundation
	Amount (\$) \$83.00	Payee address; City; State; Zip Code PO Box 300009
		Houston, TX 77230-0009
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation, HLA Gala
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
ᆫ			
1	Total pages Schedule F1: Sch: 13/23 Rpt: 53/73	2 FILER NAME Hawkins, Kristen Brauchle (The Honorable) 3 Filer ID (Ethics Commission Filer ID) 00080005	ilers)
Ŀ	<u> </u>		
4	Date	5 Payee name	
l	03/21/2023	Hover.com	
_	Amount (\$)	7 Payee address; City; State; Zip Code	
ľ	, ,		
	\$150.03	96 Mowat Avenue	
l		Toronto Ontario M6K3M1 Canada	
ᆫ		Toronto Chiano Mondini Gariada	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF EXPENDITURE	Office Overhead/Rental Expense	
l	EXPENDITORE	Check if Austin, TX, officeholder living expense	
		Website hosting	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
"	expenditure to benefit C/O		
	experientare to serious eyes		
	Date	Payee name	
	04/24/2023	Hover.com	
L			
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.03	96 Mowat Avenue	
		Toronto M6K3M1 Canada	
L			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	LXI LINDITORE	Check if Austin, TX, officeholder living expense	
		Website hosting	
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O		
L			
	Date	Payee name	
	06/26/2023	Hover.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	()		
	\$16.67	96 Mowat Avenue	
		Toronto M6K3M1 Canada	
\vdash	PURPOSE		
	OF		
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		,	
		Website hosting	
L			
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	Н	
⊢			
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1			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	r - Il Committee	-	•		ages/	Contract Labor		Travel Out of Dis OTHER (enter a	strict category not listed above)	
	·		The Instruction G	uide explains	now to cor	npie	te this form.	_			
1	Total pages Schedule F1:	l						3	Filer ID	(Ethics Commission Filers)
_	Sch: 14/23 Rpt: 54/73		kins, Kristen Brauchle	(The Honor	able)				00080005		
4	Date	1 1	e name								
L	03/15/2023	La P	alapa Downtown								
6	Amount (\$)	7 Paye	e address; City;	State	; Zip Coo	de					
	\$96.52	1110) Preston St								
		Hou	ston, TX 77002								
8	PURPOSE	(a) Cate	gory (See Categories listed at	the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		d/Beverage Expense		,	-	Check if travel			plete Schedule T.	
	EXPENDITURE		Ŭ i				_		officeholder living	g expense	
							Tacos for jud	ges	6		
L											
9	Complete ONLY if direct		date/Officeholder name	(Office sou	ght			Office h	eld	
L	expenditure to benefit C/OI	H									
	Date	Paye	e name								
	02/24/2023	Lead	dership Houston								
	Amount (\$)	Paye	e address; City;	State	; Zip Coo	de					
	\$129.53	4306	S Yoakum Blvd. Suite 3	350							
		Hou	ston, TX 77006								
\vdash	PURPOSE	(a) Cate		ales are to the time		(h)	Description				
	OF	Fees	. (tne top of this sch	nedule)	(··)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		•				=		officeholder living		
							Donation				
	Complete ONLY if direct		date/Officeholder name	(Office souç	ght			Office he	eld	
	expenditure to benefit C/OI	H									
	Date	Paye	e name								
	04/14/2023	1	gue of Women Voters								
-	Amount (\$)		e address; City;	State	; Zip Coo	de					
	\$2,500.00	1	L N Shepherd Dr	Ciaio	,p 000						
	Ψ2,000.00	l	-								
		Ste 2									
		Hou	ston, TX 77018-5507								
	PURPOSE OF	1	gory (See Categories listed at		nedule)	(b)	Description				
	EXPENDITURE		tributions/Donations M		.:		느			plete Schedule T.	
		Can	didate/Officeholder/Po	iiticai Comm	ııttee		Check if Austin, donation	, 1X,	officeholder living	y expense	
							uonauon				
	Complete ONLY if direct	Candi	date/Officeholder name		Office cour	tdr.			Office he	old.	
	Complete ONLY if direct expenditure to benefit C/OI		uate/Onicendider name	(Office souç	JIIL			Office no	eiu	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 15/23 Rpt: 55/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	06/26/2023	Marriott
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,538.60	2100 Alaskan Wy
		Seattle, WA 98121
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Hotel for Lyceum conference
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/04/2023	Meyerland Area Democrats
	Amount (\$)	Payee address; City; State; Zip Code
	\$21.00	PO Box 310061
		Houston, TX 77231-0061
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· ·
	Data	
	Date 04/07/2023	Payee name Michael's Cookie Jar
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.90	5330 Weslayan St
		Houston, TX 77005
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		food for high school mock trial event
		,
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
_		

SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/23 Rpt: 56/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	03/23/2023	National Association of Women Judges
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$263.17	1341 Connecticut Ave NW
		Ste 1138
		Washington, DC 20036-1836
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Membership fees
		Wettibership lees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/06/2023	New Orleans Airport
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$16.78	1 Terminal Dr
		Kenner, LA 70062
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense food at airport while attending CLE
		lood at airport willie attending CLL
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/22/2023	Nirmal's
	Amount (\$)	Payee address; City; State; Zip Code
	\$27.12	106 Occidental Ave S
		Seattle, WA 98104
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Meal during conference
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/OI	
H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	l 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 17/23 Rpt: 57/73	Hawkins, Kristen Brauchle (The Honorable) 00080005				
4	Date	5 Payee name				
	06/26/2023	Olympia Coffee				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$121.90	3840 California Ave SW				
		Seattle, WA 98116				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		gifts for Texas Lyceum planning committee				
		gite for read Lyouaning committee				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O	-				
	Date	Payee name				
	02/06/2023	Omni Royal Orleans				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$512.96	621 St Louis St				
		New Orleans, LA 70130				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
		Hotel for CLE				
		TIOUTION GEE				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
_	Data					
	Date 06/02/2023	Payee name Paragon				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$1,320.82	1505 N Hydin Rd.				
		Ste. 110				
		Pittsburgh, PA 15257-0001				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.				
	ZAI ZIAZITORZ	Check if Austin, TX, officeholder living expense				
		Processing fees				
	Complete ONII V if direct	Condidate/Officeholder name Office cought				
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH					
	•					

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Political Comm Credit Card Payment							OTHER (enter a category not listed above)			
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 18/23 Rpt: 58/73	l	ns, Kristen Brauchle (⁻	The Honorable)			ľ	00080005	(Ethios Commiss	10111 11010)
4	Date	5 Payee					<u> </u>			
	05/01/2023	Parag								
6	Amount (\$)	7 Payee		State; Zip C	oho					
ľ	\$22.50	· ·	N Hydin Rd.	State, Zip C	ouc					
	ΨZZ.00	Ste. 1	-							
			urgh, PA 15257-0001							
8	PURPOSE	(a) Catego	Ory (See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees	, (outs	ide of Texas. Com	plete Schedule T.	
	LAFLINDITORL					_		, officeholder living	j expense	
						Processing for	ees	i		
Ļ	Commiste ONII V if disport	Canadida	to IO#io a baldon na ma	O#iaa aa				Office he	- I al	
9	Complete ONLY if direct expenditure to benefit C/OI		te/Officeholder name	Office so	ugnt			Office he	eia	
	Date	Payee	name							
	04/03/2023	Parag	on							
	Amount (\$)	Payee	address; City;	State; Zip C	ode					
	\$22.50	1505	N Hydin Rd.							
		Ste. 1	10							
		Pittsbı	urgh, PA 15257-0001							
	PURPOSE	(a) Catego	ory (See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				=		ide of Texas. Com		
						Processing fe		, officeholder living	j expense	
						Frocessing is	ccs	•		
	Complete ONLY if direct expenditure to benefit C/OI		te/Officeholder name	Office so	l ught			Office he	eld	
	experialiture to benefit C/Oi									
	Date	Payee	name							
	03/02/2023	Parag	on							
	Amount (\$)	Payee	address; City;	State; Zip C	ode					
	\$22.50	1505	N Hydin Rd.							
		Ste. 1	10							
		Pittsbı	urgh, PA 15257-0001							
	PURPOSE	(a) Catego	Ory (See Categories listed at the	e top of this schedule)	(b)	Description				
	OF EXPENDITURE	Fees				=		ide of Texas. Com		
						Processing fe		, officeholder living	j expense	
						i roccoonig id	.03	'		
	Complete ONLY if direct	Candida	te/Officeholder name	Office so	l uaht			Office he	eld	
	expenditure to benefit C/OI		and the state of t	200 301	g · · ·			200 110	-· - -	
l										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 19/23 Rpt: 59/73	Hawkins, Kristen Brauchle (The Honorable) 00080005	
4	Date	5 Payee name	
	02/02/2023	Paragon	
	Amount (\$) \$22.50	7 Payee address; City; State; Zip Code 1505 N Hydin Rd. Ste. 110 Pittsburgh, PA 15257-0001	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fees	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_
	Date	Payee name	
	01/03/2023	Paragon	
	Amount (\$) \$22.50	Payee address; City; State; Zip Code 1505 N Hydin Rd. Ste. 110 Pittsburgh, PA 15257-0001	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Processing fees	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date 01/30/2023	Payee name Run Sister Run	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. BOX 66470 Houston, TX 77266	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Donation	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 20/23 Rpt: 60/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
L	04/05/2023	Serve Hope International
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$81.00	4420 Amherst Ave
		Dallas, TX 75225
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Coffee for the jury room
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	02/21/2023	South Asian Bar Assoc., Houston
	Amount (\$)	Payee address; City; State; Zip Code
	\$75.00	PO BOX 4178
		Houston, TX 77210
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
		Donation
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Date	Pavee name
	04/17/2023	South Asian Bar Assoc., Houston
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	PO BOX 4178
		Houston, TX 77210
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
		Donation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/23 Rpt: 61/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	04/13/2023	South Texas College of Law
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1303 San Jacinto St
		Houston, TX 77002-7006
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation
		Bondion
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	02/17/2023	State Bar of Texas
H	Amount (\$)	Payee address; City; State; Zip Code
	\$26.00	1414 Colorado St.
	,	
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense CLE materials
		OLE materials
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/24/2023	Texas Board of Legal Specialization
H	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	505 E. Huntland Drive
		Suite 400
		Austin, TX 78752
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Dues
L	0 1. 5	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
dash		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I 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 F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/23 Rpt: 62/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	04/19/2023	Texas Lyceum
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$875.00	6046 Azalea Ln.
		Dallas, TX 75230-3406
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Fees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	the state of the s
F	Date	Payee name
	06/27/2023	Texas Lyceum
H	Amount (\$)	Payee address; City; State; Zip Code
	\$295.00	6046 Azalea Ln.
		Dallas, TX 75230-3406
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Fees
		1 663
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	06/13/2023	Treebeard's
H	Amount (\$)	Payee address; City; State; Zip Code
	\$337.97	315 Travis St
	,	
		Houston, TX 77002
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Lunch for summer interns
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
\vdash		

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/23 Rpt: 63/73	Hawkins, Kristen Brauchle (The Honorable) 00080005
4	Date	5 Payee name
	06/05/2023	Vonlane
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$238.00	1200 Louisiana St
		Houston, TX 77002
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Travel outside of district
		Travel editions of district
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
_	Data	
	Date 02/16/2023	Payee name
		Weights & Measures
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,865.50	2808 Caroline
		Houston, TX 77004
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense
		breakfast for constituents
	0 1 0 0 1 1 1 1	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/12/2023	ZOOM
	Amount (\$)	Payee address; City; State; Zip Code
	\$159.80	55 ALMADEN BOULEVARD
		San Jose, CA 95113
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Video Conferencing
		Video Conferencing
	Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	·	

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide expla	Office Ov Polling E Printing E Salaries/	Expense Wages/Contract Labor		Transporta Travel in D Travel Out	
_		I		<u> </u>		ompiete uno romii	1_		
1	Total pages Schedule G: Sch: 1/7 Rpt: 64/73	l	ILER NAME lawkins, Kr	isten Brauchle (The Ho	norable)		3	Filer ID 000800	(Ethics Commission Filers) 005
4	Date	5 P	ayee name				<u> </u>		
	02/01/2023	l -	lerbsaint						
6	Amount (\$)	7 P	ayee addres	ss; City; S	tate; Zip C	ode			
	\$69.86	7	'01 St Char	les Ave,					
	Reimbursement from political contributions intended	N	lew Orlean	s, LA 70130					
8	PURPOSE	(a) C	Category (Se	e Categories listed at the top of th	is schedule)	(b) Description	CI	neck if travel	el outside of Texas. Complete Schedule T.
	OF EXPENDITURE	F	ood/Bever	age Expense			CI	neck if Austi	in, TX, officeholder living expense
	LXI LINDITORL					Dinner at CLE in	NC	DLA	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candi	idate/Officeh	older name		Office sought			Office held
	Date	Р	ayee name						
	05/29/2023	Н	litchcock C	afe					
	Amount (\$)	Р	ayee addres	ss; City; S	tate; Zip C	ode			
	\$27.35	8	18 1st Ave						
	Reimbursement from political contributions intended	S	Seattle, WA	98104					
	PURPOSE	С	Category (Se	e Categories listed at the top of the	is schedule)	Description	CI	neck if travel	el outside of Texas. Complete Schedule T.
	OF EXPENDITURE	F	Food/Bevera	age Expense		Meal in Seattle fo			in, TX, officeholder living expense trip
	Complete ONLY if direct	<u>I</u> Candi	idate/Officeh	older name		Office sought			Office held
	expenditure to benefit C/OH								
	Date	Р	ayee name						
	05/29/2023	L	.yft						
	Amount (\$)	Р	ayee addres	ss; City; S	tate; Zip C	ode			
	\$25.00	1	.85 Berry S		-				
	Reimbursement from		•						
	x political contributions intended	S	San Francis	co , CA 94107					
	PURPOSE	_ c	Category (Se	e Categories listed at the top of thi	is schedule)	Description	_		el outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Т	ravel Out o	of District		L	_		in, TX, officeholder living expense
						Travel in Seattle	for	Lyceum	1
L									
	Complete ONLY if direct expenditure to benefit C/OH	Candi	idate/Officeh	older name		Office sought			Office held
l									

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/7 Rpt: 65/73	Hawkins, Kristen Brauchle (The Honorable)	00080005
4	Date	5 Payee name	
	01/28/2023	Lyft	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$13.00	185 Berry St	
	Reimbursement from political contributions intended	San Francisco , CA 94107	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense
		Lyceum confere	nce in Austin
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/27/2023	Lyft	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	185 Berry St	
	Reimbursement from		
	X political contributions intended	San Francisco , CA 94107	
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense
		Lyceum confere	nce in Austin
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/29/2023	Marriott	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,018.59	2100 Alaskan Wy	
	Reimbursement from political contributions intended	Seattle, WA 98121	
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Out of District	Check if Austin, TX, officeholder living expense
		Hotel for Seattle	Lyceum trip.
H	Complete ONLV if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OH	Office Sought	Office field

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Over Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAN				3	Filer ID (Ethics Commission Filers)
_	Sch: 3/7 Rpt: 66/73	1	Kristen Brauchle (The Hono	rable)			00080005
4	Date	5 Payee nam	ie				
	05/29/2023	Seattle Fe	erry				
6	Amount (\$)	7 Payee addı	ress; City; State	e; Zip Co	ode		
	\$9.45	801 Alask	an Wy				
	Reimbursement from political contributions intended	Seattle, W	/A 98104				
8	PURPOSE	(a) Category	(See Categories listed at the top of this so	hedule)	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Ou	t of District			Ch	eck if Austin, TX, officeholder living expense
	EXPENDITORE				travel in Seattle f	or L	yceum
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Offic	eholder name		Office sought		Office held
	Date	Payee nam	ie				
	05/29/2023	Terra Plat	a				
	Amount (\$)	Payee addı	ress; City; State	e; Zip Co	ode		
	\$127.50	1501 Melr	ose Ave				
	X Reimbursement from political contributions intended	Seattle, W	/A 98122				
	PURPOSE	Category	(See Categories listed at the top of this so	hedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Bev	erage Expense		Dinner in Seattle	_	eck if Austin, TX, officeholder living expense Lyceum trip
_	Composite ONII V if direct	Caradidata/Offia			Office country		Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Onic	enoider name		Office sought		Office held
	Date	Payee nam	ie				
	05/29/2023	The Parki	ng Spot				
	Amount (\$)	Payee addı	ress; City; State	e; Zip Co	ode		
	\$52.96	7601 Airp					
	Reimbursement from						
	X political contributions intended	Houston,	TX 77061				
	PURPOSE	Category	(See Categories listed at the top of this sci	hedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Ou	t of District			Ch	eck if Austin, TX, officeholder living expense
					IAH parking durir	ng S	Seattle Lyceum trip
	Complete ONLY if direct	<u> </u> Candidate/Offic	eholder name		Office sought		Office held
	expenditure to benefit C/OH	Carratato Offic	S. S		Cilioo dougiit		Since Hold

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Constibutions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E Salaries/V	xpense Vages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)
			The Instruction Guide explains	now to co	omplete this form.		
1	Total pages Schedule G: Sch: 4/7 Rpt: 67/73	2 FILER NAME	Eristen Brauchle (The Honor	abla)		ı	Filer ID (Ethics Commission Filers) 00080005
	·		isteri braucilie (The Florior	abiej			00000003
4	Date 01/25/2023	5 Payee name Tiny Boxwo	ods				
6	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	nde		
	\$51.03	1503 W 35t	•	, <u>Lip 00</u>	, do		
	X Reimbursement from political contributions intended	Austin, TX	78703				
8	PURPOSE	(a) Category (se	ee Categories listed at the top of this sch	nedule)	(b) Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Bever	age Expense			Ch	eck if Austin, TX, officeholder living expense
	EXPENDITORE				lunch LBJ Wome	en's	Campaign School in Austin
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officel	nolder name		Office sought		Office held
	Date	Payee name					
	05/29/2023	Uber					
	Amount (\$)	Payee addre	ss; City; State	; Zip Co	ode		
	\$31.00	182 Howard	l St				
	Reimbursement from						
	X political contributions intended	San Francis	sco, CA 94105				
	PURPOSE	Category (Se	ee Categories listed at the top of this sch	nedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Out	of District			Ch	eck if Austin, TX, officeholder living expense
					Travel in Seattle	for I	Lyceum
	Complete ONLY if direct expenditure to benefit	Candidate/Officel	nolder name		Office sought		Office held
	C/OH						
H	Data						
	Date	Payee name					
	05/29/2023	Uber					
	Amount (\$)	Payee addre		; Zip Co	ode		
	\$20.94	182 Howard	1 St				
	Reimbursement from political contributions intended	San Francis	sco, CA 94105				
	PURPOSE	Category (Se	ee Categories listed at the top of this sch	nedule)	Description	Ch	eck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Travel Out	of District			Ch	eck if Austin, TX, officeholder living expense
	EXPENDITORE				Travel in Seattle	for I	Lyceum
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officel	nolder name		Office sought		Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Fees Food/Beverage Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Service			Salarie	Expense s/Wages/Contract L complete this fo			t of District enter a category no	t listed above)
1	Total pages Schedule G:	2	FILER NAME							3 Filer ID	(Ethics Cor	nmission Filers)
	Sch: 5/7 Rpt: 68/73		Hawkins, K	risten Bra	uchle (Th	e Honor	able)			008000	,	,
4	Date	5	Payee name									
	05/29/2023		Uber									
6	Amount (\$)	7	Payee addre	ss; Cit	y;	State;	Zip (Code				
	\$36.38		182 Howard	d St								
	Reimbursement from political contributions intended		San Francis	sco, CA 9	4105							
8	PURPOSE	(a)	Category (S	ee Categories	listed at the to	p of this sch	edule)	(b) Descrip	tion _	₫		Complete Schedule T.
	OF EXPENDITURE		Travel Out	of District					L	_	in, TX, officeholder	living expense
								Travel in S	Seattle 1	for Lyceum	1	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officel	holder nan	ne			Office so	ought		Office held	I
	Date		Payee name									
	02/02/2023		Uber									
	Amount (\$)	T	Payee addre	ss; Cit	у;	State;	Zip (Code				
	\$22.24		182 Howard		•							
	Reimbursement from											
	x political contributions intended		San Francis	sco, CA 9	4105							
	PURPOSE		Category (S	ee Categories	listed at the to	p of this sch	edule)	Descrip	tion _	Ⅎ		Complete Schedule T.
	OF EXPENDITURE		Travel Out	of District						Check if Austi	in, TX, officeholder	living expense
								Travel to d	linner a	at CLE in N	IOLA	
	Complete ONLY if direct expenditure to benefit	Cai	ndidate/Office	holder nam	ne			Office so	ought		Office held	I
	C/OH											
f	Date	Ē	Payee name									
	02/03/2023		Uber									
\vdash	Amount (\$)	\vdash	Payee addre	ss; Cit	V:	State:	Zip (Code				
	\$26.03		182 Howard			,	-1-					
	Reimbursement from											
	X political contributions intended		San Francis	sco, CA 9	4105							
	PURPOSE		Category (S	ee Categories	listed at the to	p of this sche	edule)	Descrip	tion	_		Complete Schedule T.
	OF EXPENDITURE		Travel Out	of District						Check if Austi	in, TX, officeholder	living expense
	- -							Travel to a	irport a	at CLE in N	IOLA	
L												
	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Office	holder nan	ie			Office so	ought		Office held	I
l												

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor					Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
	oroak oara'r aymone		The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G:	2 FILER NAMI	Ī			3	Filer ID (Ethics Commission Filers)			
	Sch: 6/7 Rpt: 69/73	Hawkins, K	risten Brauchle (The Honor	rable)			00080005			
4	Date	5 Payee name								
	05/29/2023	United Airli	nes							
6	Amount (\$)	7 Payee addre	ss; City; State	; Zip Co	ode					
	\$913.20	233 South	Wacker Drive							
	Reimbursement from									
	X political contributions intended	Chicago, IL	60606		_					
8	PURPOSE OF	(a) Category (s	ee Categories listed at the top of this sch	nedule)	(b) Description	≟	neck if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	Travel Out	of District		<u> </u>	_	neck if Austin, TX, officeholder living expense			
					Airfare to Seattle	tor	Lyceum			
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held			
	C/OH									
H	Data									
	Date	Payee name								
	02/01/2023	United Airli								
	Amount (\$)	Payee addre		; Zip Co	ode					
	\$279.00	233 South	Wacker Drive							
	Reimbursement from political contributions									
	intended	Chicago, IL	60606							
	PURPOSE	Category (S	ee Categories listed at the top of this sch	nedule)	Description x	=	neck if travel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Travel Out	of District		l L	Ch	neck if Austin, TX, officeholder living expense			
					Airfare from New	Orl	leans to Houston			
	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held			
	C/OH									
H	Dato	Davis								
	Date 04/27/2023	Payee name United Airli								
_										
	Amount (\$)	Payee addre		; Zip Co	oae					
	\$398.80	233 South	Wacker Drive							
	Reimbursement from political contributions intended	Chicago, IL	60606							
\vdash	PURPOSE	_			Description F	7.05	and if traval autoida of Tayes. Complete School:			
	OF	Travel Out	ee Categories listed at the top of this sch	ieuuie)	Description	_	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense			
	EXPENDITURE	Traver Out	OI DISTRICT		Airfare to McAller	⊐ n fo	or Lyceum Conf			
					l months and		· _,,			
	Complete ONLY if direct	Landidate/Office	holder name		Office sought		Office held			
	expenditure to benefit				255 55dg/ft					
	C/OH									

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

The Instruction Guide explains how to complete this form. 1 Total pages Schedule G: Sch: 7/7 Rpt: 70/73	
Sch: 7/7 Rpt: 70/73	
4 Date 02/03/2023 5 Payee name Vintage NOLA 6 Amount (\$) 7 Payee address; City; State; Zip Code 3121 Magazine Street New Orleans, LA 70115 8 PURPOSE OF EXPENDITURE	dule T.
O2/03/2023 Vintage NOLA 6 Amount (\$) 7 Payee address; City; State; Zip Code \$36.97 \$3121 Magazine Street X Reimbursement from political contributions intended New Orleans, LA 70115 8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schrod/Beverage Expense Complete ONLY if direct expenditure to benefit C/OH Payee name Westward Restaurant	dule T.
O2/03/2023	dule T.
\$36.97 Significate contributions intended New Orleans, LA 70115	dule T.
Reimbursement from political contributions intended New Orleans, LA 70115	dule T.
New Orleans, LA 70115 8 PURPOSE OF EXPENDITURE (a) Category (see categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense breakfast while at CLE in NOLA 9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name Westward Restaurant Amount (\$) Payee address; City; State; Zip Code \$100.00 \$100.00 \$2501 N Northlake Way Purpose OF EXPENDITURE Category (see Categories listed at the top of this schedule) Food/Beverage Expense Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense	dule T.
New Orleans, LA 70115	dule T.
Food/Beverage Expense	edule T.
Payee name 05/29/2023 Amount (\$) Payee address; City; State; Zip Code \$100.00 Purpose OF EXPENDITURE Pood/Beverage Expense Date 05/29/2023 Point Additional CLE in NOLA Office sought Office sought Office sought Office held Office held Office held	
9 Complete ONLY if direct expenditure to benefit C/OH Date Payee name Westward Restaurant Amount (\$) Payee address; City; State; Zip Code \$100.00 2501 N Northlake Way Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Office held Office held Office sought Office held Office he	
expenditure to benefit C/OH Date 05/29/2023 Payee name Westward Restaurant Amount (\$) Payee address; City; State; Zip Code \$100.00 \$100.00 X Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Food/Beverage Expense Possible Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense	
expenditure to benefit C/OH Date 05/29/2023 Payee name Westward Restaurant Amount (\$) Payee address; City; State; Zip Code \$100.00 \$100.00 X Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Food/Beverage Expense Possible Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense	
Date 05/29/2023 Westward Restaurant Amount (\$) Payee address; City; State; Zip Code 2501 N Northlake Way Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Payee address; City; State; Zip Code 2501 N Northlake Way Description Check if travel outside of Texas. Complete Schools Check if Austin, TX, officeholder living expense	
O5/29/2023 Westward Restaurant Amount (\$) Payee address; City; State; Zip Code \$100.00 2501 N Northlake Way X Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense Check if Austin	
Amount (\$) Payee address; City; State; Zip Code \$100.00 \$100.00 X Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Food/Beverage Expense Purpose Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense	
\$100.00 2501 N Northlake Way Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Food/Beverage Expense Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	
\$100.00 2501 N Northlake Way Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Food/Beverage Expense Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	
Reimbursement from political contributions intended Seattle, WA 98103 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Food/Beverage Expense Description Check if travel outside of Texas. Complete Schedule Check if Austin, TX, officeholder living expense	
PURPOSE OF EXPENDITURE Seattle, WA 98103 Seattle, WA 98103 Category (See Categories listed at the top of this schedule) Food/Beverage Expense Seattle, WA 98103 Description Check if travel outside of Texas. Complete Schedule) Check if Austin, TX, officeholder living expense	
OF EXPENDITURE Food/Beverage Expense Check if Austin, TX, officeholder living expense	
EXPENDITURE Food/Beverage Expense Li statut My statu	dule T.
EXPENDITURE	
Meal in Seattle for Lyceum trip	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OH	
0001	
Date Payee name	
02/03/2023 Yellow Cab	
Amount (\$) Payee address; City; State; Zip Code	
\$65.95 1406 Hays St	
Reimbursement from	
political contributions intended Houston, TX 77009	
PURPOSE Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule	
OF Travel In District Check if Austin, TX, officeholder living expense	dule T.
taxi from airport	dule T.
	dule T.
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH	edule T.
	edule T.
	edule T.
	edule T.

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ction Guide explains how to complete this form.	1		ages Schedule K: /2 Rpt: 71/73	
2	FILER NAME		(Ethics Commission	Filers)		
	Hawkins, Kri	sten Brauchle (The Honorable)		00080	005	
4	Date	5 Name of person from whom amount is received			8 Amount (\$)	
	06/23/2023	Frost Bank			y unodik (¢)	\$13.18
	00/20/2020					Ψ10.10
		6 Address of person from whom amount is received; City; State; Zip Code				
		Houston , TX 77251-1315				
			if politic	and nontr	ibution returned to filer	
			п роши	cai contr	ribution returned to filer	
		Monthly Interest				
	Date	Name of person from whom amount is received			Amount (\$)	
	05/22/2023	Frost Bank				\$10.02
		Address of person from whom amount is received; City; State; Zip Code				
		Houston , TX 77251-1315				
		Purpose for which amount is received Check	if politic	cal contr	ribution returned to filer	
		Monthly Interest				
	5 .					
	Date	Name of person from whom amount is received			Amount (\$)	# 40.00
	04/24/2023	Frost Bank				\$12.02
		Haveton TV 77054 4045				
		Houston , TX 77251-1315				
			if polition	cal contr	ribution returned to filer	
		Monthly Interest				
	Date	Name of person from whom amount is received			Amount (\$)	
	03/22/2023	Frost Bank				\$10.16
		Address of person from whom amount is received; City; State; Zip Code				
		Houston , TX 77251-1315				
		Purpose for which amount is received Check	if politic	cal contr	ribution returned to filer	
		Monthly Interest				
_	Data	·			A	
	Date	Name of person from whom amount is received			Amount (\$)	ተ10 07
	02/23/2023	Frost Bank				\$10.97
		Address of person from whom amount is received; City; State; Zip Code				
		Houston , TX 77251-1315				
		Purpose for which amount is received Check	if polition	cal contr	ribution returned to filer	
		Monthly Interest				

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 72/73 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Hawkins, Kristen Brauchle (The Honorable) 00080005 5 Name of person from whom amount is received 8 Amount (\$) 01/25/2023 \$12.44 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77251-1315 Purpose for which amount is received Check if political contribution returned to filer Monthly Interest

IN-KIND CONTRIBUTIONS OR POLITICAL EXPENDITURES FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Inst	ruction (Suide explains	s how to complete	this form.	1 Total pages Schedule T Sch: 1/1 Rpt: 73/73	:					
2 FILER NAME					1	mmission Filers)					
Hawkins, Krister			<u> </u>		00080005						
	tor / Corpor	ation or Labor Org	ganization / Pledgor /Pay	ee							
United Airlines											
5 Contribution / Exp	enditure rep	oorted on:			_						
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1					
Schedule F2		Schedule F4	X Schedule G	Schedule H	Schedule COH-UC						
6 Dates of Travel	7 Name	of person(s) trave	ling								
	Hawki	ns, Kristen (Jud	ge)								
	8 Depart	ure city or name c	of departure location								
12/06/2022 Houston											
	9 Destina	ation city or name	of destination location								
12/06/2022	Seattle	е									
10 Means of transpor	tation	11 Purpose of tra	avel (including name of c	conference, seminar, or	other event)						
Commercial Airp	olane	Airfare for L	yceum conference								
Name of Contribu	tor / Corpor	ation or Labor Org	ganization / Pledgor /Pay	ee							
United Airlines											
Contribution / Exp	enditure rep	oorted on:									
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1					
Schedule F2		Schedule F4	X Schedule G	Schedule H	Schedule COH-UC	_					
Dates of Travel	Name	of person(s) trave	ling								
		ns, Kristen (Jud									
	Depart	ure city or name c	of departure location								
12/09/2022	Seattle	e									
	Destina	ation city or name	of destination location								
12/09/2022	Houst	on									
Means of transpor	tation	Purpose of tra	avel (including name of c	conference, seminar, or	other event)						
Commercial Airp	olane	Return flight	t from Lyceum confere	ence							
Name of Contribu	tor / Corpor	ation or Labor Org	ganization / Pledgor /Pay	ee							
United Airlines	·	_									
Contribution / Exp	enditure rep	oorted on:									
Schedule A2		Schedule B	Schedule B(J)	Schedule C2	Schedule D	Schedule F1					
Schedule F2		Schedule F4	X Schedule G	Schedule H	Schedule COH-UC						
Dates of Travel	Name	of person(s) trave									
Bates of Traver	1	ns, Kristen (Jud									
	L	•	of departure location								
02/03/2023		orleans	a departure rocation								
	ļ		of destination location								
02/03/2023	Houst		S. Godanadon location								
Means of transpor		ı	avel (including name of c	conference, seminar, or	other event)						
Commercial Air		The state of the s	re from New Orleans		2						