### JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	n Guide explains how to com	plete this form.	1 Filer ID (Ethics Commis 00067429	sion Filers)	2 Total page	es filed: 26	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI			
OFFICEHOLDER	The Honorable	Michelle M.				E USE ONLY	
NAME	The Honorable				Date Received		
					ELECTRON	IICALLY FILED	
	NICKNAME	LAST		SUFFIX	07/17/2023		
		Slaughter		00111/			
		Slaughter					
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-deliver	red or Date Postmarked	
OFFICEHOLDER MAILING	P.O. Box 54						
ADDRESS					Receipt #	Amount	
Change of Address							
Change of Address	League City, TX 77574				Date Processed		
					Date Imaged		
5 CAMPAIGN	MS / MRS / MR	FIRST			MI		
TREASURER	Ms.	Holly					
NAME	1713.	TIONY					
	NICKNAME	LAST			SUFFIX		
		Rumbaugh					
6 CAMPAIGN	STREET ADDRESS (NO PO	) BOX PLEASE):	APT	/ SUITE #; CITY;		STATE; ZIP CODE	
TREASURER	4923 Cross Creek Ln.						
ADDRESS	4323 CI033 CICCK EII.						
(Residence or Business)							
	League City, TX 77573						
7 CAMPAIGN	AREA CODE PHO	NE NUMBER	EXTENSION				
TREASURER PHONE	(713) 550-0492						
8 REPORT							
TYPE	January 15	30th day before	e election	Runoff		r campaign treasurer	
					_	(officeholder only)	
	X July 15	8th day before		Exceeded modified reporting limit	Final Report	(Attach C/OH-FR)	
				roporting inne			
9 PERIOD	Month Day Year			Month Day	Year		
COVERED	01/01/2023	TH	IROUGH	06/30/202	3		
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month Day Year		rimary	Runoff	Other		
	03/05/2024						
			Seneral	Special			
11 OFFICE	OFFICE HELD (if any)	ł		12 OFFICE SOUGHT	(if known)		
	Court Of Criminal Appeal	s, Judge Place 8	3	Court Of Crimina		dge Place 8	
		,				J	
		GO 1	O PAGE 2				
⊢orms provided by Te	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V3.5.1.a18ea2ca						

### JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 26

13 C / OH NAME	Slaughter, Michelle M	. (The Honorable)	14 Filer ID ( 00067429	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without t I officeholders are required to report this information	he candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRES	3S	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		<b>\$</b> 0.00
		CAL CONTRIBUTIONS		\$ 32,500.00
EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	PLEDGES, LOANS, OR GUARANTEES OF LOANS ZED POLITICAL EXPENDITURES	S)	
TOTALS				\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		<b>\$</b> 5,567.26
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LA	AST DAY OF THE	<b>\$</b> 30,198.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	<b>\$</b> 0.00
17 AFFIDAVIT				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.		
		The Honorat	ole Michelle M. Slaug	ihter
			Candidate or Officehol	
	TARY STAMP / SEAL AB			
	TART STAWF / SEAL ABU	Jv L		
		aid	, this the	day
of	, 20, to ce	ertify which, witness my hand and seal of office.		
Signature of office	cer administering oath	Printed name of officer administering oath	Title of officer	administering oath
Forms provided by Te	xas Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.a18ea2ca

### SUBTOTALS - JC/OH

## FORM JC/OH COVER SHEET PG 3

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	18 FILER NAME19 Filer ID(Slaughter, Michelle M. (The Honorable)00067429						
	E SUBTOTALS SCHEDULE		SUBTOTAL AMOUNT				
1. X	<b>\$</b> 32,500.00						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$				
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	5	<b>\$</b> 2,816.61				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$				
9. X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		<b>\$</b> 2,750.65				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$				

## MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/26	
2 FILER NAME		3	Filer ID (Ethics Commission Filers)	
Slaughter, M	lichelle M. (The Honorable)		00067429	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)
05/25/2023	The Crew Law Firm, PC	/		\$2,500.00
00/20/2020	6 Contributor address; City; State; Zip Code		•	+_,
	<b>6</b> Contributor address, City, State, Zip Code			
	League City, TX 77573			
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 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor Out-of-state PAC (ID#:	<b>`</b>	Г	Amount of Contribution (\$)
06/08/2023	Full name of contributor out-of-state PAC (ID#: The Pinkerton Law Firm, PLLC	)		
00/06/2023				\$30,000.00
	Contributor address; City; State; Zip Code			
	Houston, TX 77007			
Contributor's I	Principal Occupation	Contributor's Job Title	-	
Contributor's e	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)			

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense nmittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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 F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 5/26		Slaughter, Michelle M. (The Honorable)	)			00067429
4	Date	5	Payee name				
	01/03/2023		Bank of America				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$16.00		100 N. Tryon St.				
			Charlotte, NC 28255				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Accounting/Banking	Judio)		outs	de of Texas. Complete Schedule T.
	EXPENDITORE					, TX	officeholder living expense
					bank fees		
_							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	int		Office held
	Date		Payee name				
	02/01/2023		Bank of America				
	Amount (\$)			Zip Co			
	\$16.00		100 N. Tryon St.	Zip Co			
	φ10.00						
			Charlotte, NC 28255				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Accounting/Banking				de of Texas. Complete Schedule T.
						, TX	officeholder living expense
					bank fees		
			And the second				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	jrit		Office held
		_					
	Date 03/01/2023		Payee name Bank of America				
	Amount (\$)			Zip Co	de		
	\$16.00		100 N. Tryon St.				
			Charlotte, NC 28255	r			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description	outo	de ef Touce, Complete Cabadula T
	EXPENDITURE		Accounting/Banking				de of Texas. Complete Schedule T. , officeholder living expense
					bank fees	,	
-	Complete ONLY if direct		Candidate/Officeholder name O	office sou	aht		Office held
	expenditure to benefit C/OI						

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Imittee Legal Services The Instruction Guide explains h	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/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 F1:	2	FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 2/3 Rpt: 6/26		Slaughter, Michelle M. (The Honorable)	)			00067429
4	Date	5	Payee name				
	04/03/2023		Bank of America				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	de		
	\$16.00		100 N. Tryon St.				
			Charlotte, NC 28255				
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Accounting/Banking	,	Check if travel	outs	ide of Texas. Complete Schedule T.
	EXPENDITORE					, TX	, officeholder living expense
					bank fees		
_							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held
-	Date		Payee name				
	05/01/2023		Bank of America				
				7:0 00	de		
	Amount (\$)			Zip Co	le		
	\$16.00		100 N. Tryon St.				
			Charlotte, NC 28255				
_	PURPOSE	(a)	Category (See Categories listed at the top of this sche	odulo)	(b) Description		
	OF	Ľ	Accounting/Banking	cuuic)	·	outs	ide of Texas. Complete Schedule T.
	EXPENDITURE		5 5			, тх	, officeholder living expense
					bank fees		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office sou	ght		Office held
	Date		Payee name				
	06/01/2023		Bank of America				
	Amount (\$)		Payee address; City; State;	Zip Co	de		
	\$16.00		100 N. Tryon St.				
			Charlotte, NC 28255				
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b) Description		
	OF EXPENDITURE		Accounting/Banking				ide of Texas. Complete Schedule T.
						, TX	, officeholder living expense
					bank fees		
			Condidate (Office la July and a state of the				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name O	office soug	jnt		Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

			EXPENDITURE CATEGO	ORIES FO	R BO	DX 8(a)		
	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 explain	Office Ov Polling Ex Printing E Salaries/V	erhea kpense xpens Nages	se s/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 F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)
	Sch: 3/3 Rpt: 7/26		Slaughter, Michelle M. (The Honorabl	le)				00067429
4	Date	5	Payee name					
	06/23/2023		Blakemore & Associates					
6	Amount (\$)	7	Payee address; City; Stat	e; Zip Co	ode			
-	\$1,500.00		1 E Greenway Plaza	-, 1 -				
			Suite 225					
			Houston, TX 77046					
8	PURPOSE	<u> </u>			(h)	Description		
ľ	OF		Category (See Categories listed at the top of this se Consulting Expense	chedule)	(0)		outsi	de of Texas. Complete Schedule T.
	EXPENDITURE					Check if Austin	, тх,	officeholder living expense
						Consulting se	ervi	ces
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held
	Date		Payee name					
	06/23/2023		TFRW Convention 2023 PAC					
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode			
	\$1,200.00		2113 Flat Creek Dr					
			Richardson, TX 75080-2331					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this so Event Expense	chedule)	(b)	Check if Austin	, тх,	de of Texas. Complete Schedule T. officeholder living expense nibitor booth at convention
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	<b>l</b> Jght			Office held
	Date		Payee name					
	06/10/2023		Walmart					
	Amount (\$)		Payee address; City; Stat	e; Zip Co	ode			
	\$20.61		1710 Broadway St.					
	DUDDOSE		Pearland, TX 77581		(b)	Description		
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this se Printing Expense	chedule)	(0)			de of Texas. Complete Schedule T. officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Office sou	ught			Office held

POLITICAL EX	(PENDITURES FROM PERSON	IAL FUNDS	SCHEDULE G		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/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: Sch: 1/19 Rpt: 8/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067429		
4 Date 05/15/2023	5 Payee name Aloft Austin Downtown				
6 Amount (\$) \$90.70 X Reimbursement from political contributions intended	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>109 E 7th St</li> <li>Austin, TX 78701</li> </ul>				
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 T. Check if Austin, TX, officeholder living expense Chaign volunteers		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date	Payee name				
06/13/2023	Austin Airport				
Amount (\$) \$5.17 Reimbursement from political contributions intended	Payee address; City; State; Zip C 3600 Presidential Blvd Austin, TX 78719	ode			
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 T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		
Date 06/13/2023	Payee name Austin Article				
Amount (\$) \$5.49	Payee address;City;State; Zip C3600 Presidential Blvd	ode			
X         Reimbursement from political contributions intended	Ste 213 Austin, TX 78719				
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 T. Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held		

POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	bayment/Reimbursement         Solicitation/Fundraising Expense           verhead/Rental Expense         Transportation Equipment & Related Expense           xpense         Travel in District           xpense         Travel Out of District           Wages/Contract Labor         OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 2/19 Rpt: 9/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00067429
4 Date 03/03/2023	5 Payee name Avenida Central Garage	· ·
6 Amount (\$) \$25.00 X Reimbursement from political contributions intended	<ul> <li>Payee address; City; State; Zip Control</li> <li>1001 Avenida De Las Americas</li> <li>Houston, TX 77010</li> </ul>	ode
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking for campaign event
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
02/28/2023	Black's BBQ	
Amount (\$) \$14.94 Reimbursement from political contributions	Payee address; City; State; Zip Co 3110 Guadalupe St.	ode
X political contributions intended	Austin, TX 78705	
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 T. Check if Austin, TX, officeholder living expense Lunch with colleagues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
04/25/2023	Black's BBQ	
Amount (\$) \$20.89	Payee address; City; State; Zip Co 3110 Guadalupe St.	ode
X Reimbursement from political contributions intended	Austin, TX 78705	
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 T.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

	POLITICAL EX	PENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1	Total pages Schedule G: Sch: 3/19 Rpt: 10/26	2       FILER NAME       3       Filer ID (Ethics Commission Filers)         Slaughter, Michelle M. (The Honorable)       00067429			
4	Date 06/08/2023	5 Payee name Buc-ee's #26			
6	Amount (\$) \$16.94 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 205 IH-45 S Madisonville, TX 77864			
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 T. Check if Austin, TX, officeholder living expense travel meal			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	02/19/2023	Buc-ee's #26			
	Amount (\$) \$16.16 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 205 IH-45 S Madisonville, TX 77864			
	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 T. Check if Austin, TX, officeholder living expense travel meal			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			
	Date 06/08/2023	Payee name Buc-ee's #26			
	Amount (\$) \$16.94	Payee address;City;State; Zip Code205 IH-45 S			
	X Reimbursement from political contributions intended	Madisonville, TX 77864			
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense travel meal Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held			

	POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Exp / - Gift/Awards/Memorials Expense Printing Exp	yment/Reinbursement     Solicitation/Fundraising Expense       rhead/Rental Expense     Transportation Equipment & Related Expense       pense     Travel in District       ges/Contract Labor     OTHER (enter a category not listed above)			
1	Total pages Schedule G: Sch: 4/19 Rpt: 11/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067429			
4	Date 06/09/2023	5 Payee name Buc-ee's #26				
6	Amount (\$) \$16.75 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 205 IH-45 S Madisonville, TX 77864				
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 T. Check if Austin, TX, officeholder living expense travel meal			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
	Date 06/27/2023	Payee name Buc-ee's #28				
	Amount (\$) \$10.80 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 1700 Highway 71 East Bastrop, TX 78602				
	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 T.			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
	Date 06/13/2023	Payee name Buc-ee's #28				
	Amount (\$) \$31.17	Payee address; City; State; Zip Co 1700 Highway 71 East	de			
	X Reimbursement from political contributions intended	Bastrop, TX 78602				
	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 T. Check if Austin, TX, officeholder living expense travel meal			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held			
Γ						

POLITICAL EX	PENDITURES FROM PERSON	AL FUNDS SCHEDULE G
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees         Office Ov           Food/Beverage Expense         Polling E           y -         Gift/Awards/Memorials Expense         Printing F	bayment/Reimbursement         Solicitation/Fundraising Expense           verhead/Rental Expense         Transportation Equipment & Related Expense           xpense         Travel in District           xpense         Travel Out of District           Wages/Contract Labor         OTHER (enter a category not listed above)
1 Total pages Schedule G: Sch: 5/19 Rpt: 12/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00067429
4 Date 05/15/2023	5 Payee name Buc-ee's #28	
6 Amount (\$) \$6.48 X Reimbursement from political contributions intended	<ul> <li>Payee address; City; State; Zip C 1700 Highway 71 East Bastrop, TX 78602</li> </ul>	ode
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 T. Check if Austin, TX, officeholder living expense travel meal
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date	Payee name	
02/18/2023	Buc-ee's Ennis	
Amount (\$) \$11.20 Reimbursement from political contributions intended	Payee address; City; State; Zip C 1181 Creechville Rd Ennis, TX 75119	ode
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 T. Check if Austin, TX, officeholder living expense travel meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/10/2023	Payee name Buc-ee's Katy	
Amount (\$) \$8.93	Payee address; City; State; Zip C 27700 Katy Fwy	ode
X Reimbursement from political contributions intended	Katy, TX 77494	
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 T. Check if Austin, TX, officeholder living expense travel meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Exp /- Gift/Awards/Memorials Expense Printing Ex	yment/Reinbursement     Solicitation/Fundraising Expense       rhead/Rental Expense     Transportation Equipment & Related Expense       pense     Travel in District       gense     Travel Out of District       ages/Contract Labor     OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 6/19 Rpt: 13/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	<b>3</b> Filer ID (Ethics Commission Filers) 00067429	
4	Date 02/27/2023	5 Payee name Buc-ee's Katy		
6	Amount (\$) \$11.67 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 27700 Katy Fwy Katy, TX 77494		
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 T.	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
F	Date	Payee name		
	03/01/2023	Buc-ee's Katy		
	Amount (\$) \$9.19 X Reimbursement from political contributions intended	Payee address; City; State; Zip Co 27700 Katy Fwy Katy, TX 77494	de	
	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 T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	Date 05/02/2023	Payee name Buc-ee's Katy		
	Amount (\$) \$6.71	Payee address; City; State; Zip Co 27700 Katy Fwy	de	
	Reimbursement from political contributions intended	Katy, TX 77494		
	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 T.	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Reinbursement Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District ontract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 7/19 Rpt: 14/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067429	
4	Date 05/17/2023	5 Payee name Buc-ee's Katy		
6	Amount (\$) \$6.48 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 27700 Katy Fwy Katy, TX 77494		
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	ffice sought Office held	
	Date	Payee name		
	01/21/2023	Buc-ee's Waller		
	Amount (\$) \$12.60 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 40900 US Hwy 290 Bypass Waller, TX 77484		
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	ffice sought Office held	
	Date 04/26/2023	Payee name Buc-ee's Waller		
	Amount (\$) \$10.78	Payee address; City; State; Zip Code 40900 US Hwy 290 Bypass		
	X Reimbursement from political contributions intended	Waller, TX 77484		
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	ffice sought Office held	
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	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment			
1	Total pages Schedule G: Sch: 8/19 Rpt: 15/26	2       FILER NAME       3       Filer ID       (Ethics Commission Filers)         Slaughter, Michelle M. (The Honorable)       00067429		
4	Date 05/19/2023	5 Payee name Buc-ee's Waller		
6	Amount (\$) \$9.19 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 40900 US Hwy 290 Bypass Waller, TX 77484		
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 T. Check if Austin, TX, officeholder living expense travel meal		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
F	Date	Payee name		
	05/20/2023	Buc-ee's Waller		
	Amount (\$) \$12.95 Reimbursement from	Payee address;       City;       State;       Zip       Code         40900 US Hwy 290 Bypass		
	X political contributions intended	Waller, TX 77484		
	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 T. Check if Austin, TX, officeholder living expense travel meal		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		
	Date 05/16/2023	Payee name Capital Grille		
	Amount (\$) \$25.75	Payee address;City;State;Zip Code117 W 4th St		
	X Reimbursement from political contributions intended	Austin, TX 78701		
	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 T. Check if Austin, TX, officeholder living expense Lunch with colleagues		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	EXPENDITURE CATEGORIES FOR BOX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/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: Sch: 9/19 Rpt: 16/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067429
4 Date 06/23/2023	5 Payee name Capitol Gift Shop		
6 Amount (\$) \$193.77 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1400 Congress Ave. Suite E1.006 Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense or volunteers/campaign donors
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
05/02/2023	Chinatown		
Amount (\$)	Payee address; City; State; Zip C	odo	
\$21.32	107 W. Fifth St	ue	
X political contributions intended	Austin, TX 78701		
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 T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
06/19/2023	Enterprise Rent-A-Car		
Amount (\$) \$99.65 X Reimbursement from political contributions intended	Payee address; City; State; Zip C 6505 Convair Rd Suite 430 El Paso, TX 79925	ode	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

F	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politice Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	otal pages Schedule G: Sch: 10/19 Rpt: 17/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067429
	Pate 2/08/2023	5 Payee name Etsy.com		
	mount (\$) \$123.41	<ul> <li>Payee address; City; State; Zip Ci</li> <li>55 Washington St</li> <li>Suite 512</li> <li>Brooklyn, NY 11201</li> </ul>	ode	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense r campaign volunteer/donor
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	ate	Payee name		
	5/26/2023	Etsy.com		
	mount (\$) \$43.83	Payee address; City; State; Zip C 55 Washington St Suite 512	ode	
	intended	Brooklyn, NY 11201		
	PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense riefing attorney
e	Complete <u>ONLY</u> if direct xpenditure to benefit //OH	Candidate/Officeholder name	Office sought	Office held
	pate 4/25/2023	Payee name Fisherman's Wharf		
A	mount (\$) \$104.56	Payee address; City; State; Zip C 2200 Harborside Dr	ode	
D	Reimbursement from political contributions intended	Galveston, TX 77550		
	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 T. Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense
e	complete <u>ONLY</u> if direct xpenditure to benefit c/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/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: Sch: 11/19 Rpt: 18/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	3	<b>3</b> Filer ID (Ethics Commission Filers) 00067429
4 Date 04/24/2023	5 Payee name Fort Worth Republican Women		
6 Amount (\$) \$300.00 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 101613 Fort Worth, TX 76185-1613		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense igning Party registration fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
06/21/2023	Higher Ground		
Amount (\$) \$117.44 Reimbursement from political contributions	Payee address; City; State; Zip C 720 Congress Ave	ode	
intended	Austin, TX 78701		
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 T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 05/19/2023	Payee name Hilton Waco		
Amount (\$) \$12.83	Payee address; City; State; Zip C 113 South University Parks Dr	ode	
X Reimbursement from political contributions intended	Waco, TX 76701-2241		
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 T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		/Reinbursement         Solicitation/Fundraising Expense           Rental Expense         Transportation Equipment & Related Expense           Travel in District         Travel Out of District           Contract Labor         OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 12/19 Rpt: 19/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067429	
4	Date 05/20/2023	5 Payee name Hilton Waco	i	
6	Amount (\$) \$12.83 X Reimbursement from political contributions intended	<ul> <li>Payee address; City; State; Zip Code 113 South University Parks Dr</li> <li>Waco, TX 76701-2241</li> </ul>		
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense el meal	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	office sought Office held	
F	Date	Payee name		
	05/20/2023	Hilton Waco		
	Amount (\$) \$7.41	Payee address; City; State; Zip Code 113 South University Parks Dr		
	X political contributions intended	Waco, TX 76701-2241		
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	office sought Office held	
	Date 01/17/2023	Payee name Hruska's		
	Amount (\$) \$14.48	Payee address; City; State; Zip Code 109 W State Highway 71		
	X Reimbursement from political contributions intended	Ellinger, TX 78938		
	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name O	office sought Office held	

	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhe Food/Beverage Expense Polling Exper Gift/Awards/Memorials Expense Printing Expe	ent/Reimbursement ad/Rental Expense     Solicitation/Fundraising Expense       ransportation Equipment & Related Expense       se     Travel in District       nse     Travel Out of District       es/Contract Labor     OTHER (enter a category not listed above)	
1	Total pages Schedule G: Sch: 13/19 Rpt: 20/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00067429	
4	Date 02/14/2023	5 Payee name Hruska's		
6	Amount (\$) \$6.45 X Reimbursement from political contributions intended	<ul> <li>Payee address; City; State; Zip Code 109 W State Highway 71</li> <li>Ellinger, TX 78938</li> </ul>		
8	PURPOSE OF EXPENDITURE	Food/Beverage Expense	Description     Check if travel outside of Texas. Complete Schedule T.     Check if Austin, TX, officeholder living expense     avel meal	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
	Date	Payee name		
	03/07/2023	Hruska's		
⊢				
	Amount (\$) \$6.10 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code 109 W State Highway 71 Ellinger, TX 78938		
	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 T. Check if Austin, TX, officeholder living expense avel meal	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
F	Date	Payee name		
1	05/19/2023	Huaco Eatery		
	Amount (\$) \$17.68	Payee address; City; State; Zip Code 720 Franklin Ave		
	X Reimbursement from political contributions intended	Waco, TX 76701		
	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 T. Check if Austin, TX, officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held	
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E by - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement verhead/Rental Expense Expense Expense Wages/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: Sch: 14/19 Rpt: 21/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067429
4 Date 06/14/2023	5 Payee name Juliet Italian Kitchen		
6 Amount (\$) \$97.06 X Reimbursement from political contributions intended	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>1500 Barton Springs Rd.</li> <li>Austin, TX 78704</li> </ul>		
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 T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
04/28/2023	Kabuki		
Amount (\$) \$17.07	Payee address; City; State; Zip C 2525 Gulf Fwy S	ode	
x political contributions intended	League City, TX 77573		
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 T. Check if Austin, TX, officeholder living expense Ague
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
03/24/2023	King's Landing		
Amount (\$) \$47.54	Payee address;City;State;Zip C1427 S Valley Mills Dr	ode	
X Reimbursement from political contributions intended	Waco, TX 76711		
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 T. Check if Austin, TX, officeholder living expense ague while traveling for Court business
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G				
	EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Ma Candidate/Officeholder/Po Credit Card Payment	Event Expense Loan Re Fees Office O Food/Beverage Expense Polling E le By - Giff/Awards/Memorials Expense Printing	epayment/Reinbursement     Solicitation/Fundraising Expense       tverhead/Rental Expense     Transportation Equipment & Related Expense       Expense     Travel in District       Expense     Travel Out of District       /Wages/Contract Labor     OTHER (enter a category not listed above)		
1 Total pages Schedule ( Sch: 15/19 Rpt: 22/2		<b>3</b> Filer ID (Ethics Commission Filers) 00067429		
4 Date	5 Payee name			
05/18/2023	Las Cazuela's Mexican Restaurant			
6 Amount (\$) \$18.				
X Reimbursement from political contributions intended	Austin, TX 78702			
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 T. Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	t Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
06/19/2023	Lyft			
Amount (\$)	Payee address; City; State; Zip C	Code		
\$28.				
X Reimbursement from political contributions intended	San Francisco, CA 94158			
PURPOSE	Category (See Categories listed at the top of this schedule)	Description Check if travel outside of Texas. Complete Schedule T.		
OF EXPENDITURE	Travel In District	Check if Austin, TX, officeholder living expense Ride from airport to Court of Criminal Appeals, Austin TX		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	t Candidate/Officeholder name	Office sought Office held		
Date	Payee name			
06/22/2023	Metropolis Parking			
Amount (\$) \$4.	Payee address;City;State;Zip C991521 San Antonio St	Code		
X         Reimbursement from political contributions intended	Austin, TX 78701			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Parking		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	t Candidate/Officeholder name	Office sought Office held		

POL	POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Accountin Consultin Contributi Candic	ng Expense ng/Banking g Expense ions/ Donations Made B date/Officeholder/Politica rd Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing	payment/Reimbursement verhead/Rental Expense expense Expense Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
	ges Schedule G: /19 Rpt: 23/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067429
4 Date 05/29/2	023	5 Payee name Nespresso USA, Inc.		
	\$50.00 bursement from cal contributions	7 Payee address; City; State; Zip Code 111 W. 33rd St. 5th Floor New York, NY 10120		
C C	POSE DF IDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense For court chambers
	e <u>ONLY</u> if direct ure to benefit	Candidate/Officeholder name	Office sought	Office held
Date		Payee name		
04/26/2	023	Panera Bread		
	(\$) \$5.29 abursement from cal contributions	Payee address;     City;     State;     Zip Code       .29     2805 Bee Caves Road		
X polition		Austin, TX 78746		
	POSE DF IDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	e <u>ONLY</u> if direct ure to benefit	Candidate/Officeholder name	Office sought	Office held
Date 05/03/2	023	Payee name Perry's Steakhouse		
Amount	(\$) \$177.35	Payee address; City; State; Zip C 1997 W Gray St	ode	
	bursement from cal contributions ded	Houston, TX 77019		
c	POSE DF IDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	e <u>ONLY</u> if direct ure to benefit	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office O Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing E	payment/Reimbursement verhead/Rental Expense Expense Expense Wages/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: Sch: 17/19 Rpt: 24/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00067429
4 Date 06/19/2023	5 Payee name Pistachio Land		
6 Amount (\$) \$102.31 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 7320 Highway 54/70 Alamogordo, NM 88310		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
06/14/2023	Rosa's Cantina		
Amount (\$) \$124.67	Payee address; City; State; Zip C 3454 Doniphan Dr	ode	
X political contributions intended	El Paso, TX 79922		
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 T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date	Payee name		
04/21/2023	Sleep Inn & Suites		
Amount (\$) \$108.18	Payee address; City; State; Zip C 1980 S IH-35	ode	
X Reimbursement from political contributions intended	Round Rock, TX 78681		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ov Food/Beverage Expense Polling E y - Gift/Awards/Memorials Expense Printing F	payment/Reimbursement verhead/Rental Expense xpense Expense Wages/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: Sch: 18/19 Rpt: 25/26	2 FILER NAME Slaughter, Michelle M. (The Honorable)		<b>3</b> Filer ID (Ethics Commission Filers) 00067429		
4 Date 04/27/2023	5 Payee name Sleep Inn & Suites				
6 Amount (\$) \$131.22 X Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 1980 S IH-35 Round Rock, TX 78681				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held         expenditure to benefit       C/OH       Office sought       Office held					
Date	Payee name				
06/13/2023	Southwest Airlines				
Amount (\$) \$217.97 X Reimbursement from political contributions intended	Payee address; City; State; Zip Code P.O. Box 36647-1CR Dallas, TX 75235				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense rom Austin to El Paso		
Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held         expenditure to benefit       C/OH       Office held       Office held					
Date 04/27/2023	Payee name State Bar of Texas				
Amount (\$) \$30.00	Payee address;     City;     State;     Zip Code       1414 Colorado Street				
X Reimbursement from political contributions intended	Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Section dues		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Officeholder name	Office sought	Office held		

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G					
	Banking xpense s/ Donations Made B e/Officeholder/Politica	Fees Food/Beverage Expense y - Gift/Awards/Memorials Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	s Schedule G: 9 Rpt: 26/26	2       FILER NAME       3       Filer ID (Ethics Commission Filers)         Slaughter, Michelle M. (The Honorable)       00067429			
4 Date 06/21/202	23	5 Payee name Trader Joe's			
	\$34.94 rsement from contributions	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>211 Walter Seaholm Dr</li> <li>Austin, TX 78701</li> </ul>			
8 PURPO OF EXPEND		(a) Category (See Categories listed at the top of this sched Food/Beverage Expense	dule) (b) Description [ [ travel meals	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held         expenditure to benefit       C/OH       Office sought       Office held					
Date		Payee name			
06/20/202	23	Trader Joe's			
Amount (\$	\$40.00	Payee address;     City;     State;     Zip Code       211 Walter Seaholm Dr			
	rsement from contributions d	Austin, TX 78701			
PURPO OF EXPEND		Category (See Categories listed at the top of this sched Food/Beverage Expense	dule) Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held         expenditure to benefit       C/OH       Office held       Office held					
Date		Payee name			
03/01/202	23	Wyndham Resort			
Amount (\$	) \$30.00	Payee address;     City;     State;     Zip Code       825 McBee St			
	rsement from contributions d	Austin, TX 78723			
PURPO OF EXPEND		Category (See Categories listed at the top of this sched Travel In District	<sup>dule)</sup> Description	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Complete ONLY if direct       Candidate/Officeholder name       Office sought       Office held         expenditure to benefit       C/OH       Office sought       Office held				