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) 00065741 83 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable Charles A. NAME Date Received **ELECTRONICALLY FILED** 07/17/2023 NICKNAME LAST **SUFFIX** Kin Spain Jr. CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; ZIP CODE Date Hand-delivered or Date Postmarked **OFFICEHOLDER** P.O. Box 56386 MAILING Amount Receipt # **ADDRESS** Change of Address Houston, TX 77256-6386 Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Geoffrey C. NAME NICKNAME LAST **SUFFIX** Westergaard **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER** 2726 Bissonnet Street **ADDRESS** Suite 240-64 (Residence or Business) Houston, TX 77005-1352 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 291-0999 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2023 06/30/2023 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2014 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Court Of Appeals, Justice Place 4 District 14 Court Of Appeals, Justice Place 4 District 14

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Spain Jr., Charles A.	(The Honorable)	14 Filer ID 00065741	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political ex These expenditures may have been made w officeholders are required to report this info	vithout the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER N	AME	
		COMMITTEE CAMPAIGN TREASURER A	DDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS(OTHEF ES OF LOANS, OR CONTRIBUTIONS MAD		\$ 0.00
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF	I OANS)	\$ 34,980.00
EXPENDITURE TOTALS		ZED POLITICAL EXPENDITURES	LOANS)	\$ 0.00
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 12,821.20
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 76,665.43
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOA TING PERIOD	NS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT			penalty of perjury, that the accudes all information required t	
		The F	Honorable Charles A. Spair	ı Jr.
		Signa	ature of Candidate or Officehol	lder
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
		aid		day
of	, 20, to ce	rtify which, witness my hand and seal of offi	ce.	
Signature of office	cer administering oath	Printed name of officer administering of	eath Title of office	r administering oath

SUBTOTALS - JC/OH

FORM JC/OH **COVER SHEET PG 3**

					3 of 83		
18 FILER Spain		(Eth	ics Commission Filers)				
20 SCHE	Spain Jr., Charles A. (The Honorable) 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE						
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	34,980.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$			
3.	Х	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	3,500.00		
4.	Х	SCHEDULE E(J): LOANS (JUDICIAL)		\$	0.00		
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	1,047.37		
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$			
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	4,543.21		
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	7,230.62		
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	\$			
				•			

MONET	ARY POLITICAL CONTR	RIBUTIONS	SCHEDULE A(J)1
The Instru	ction Guide explains how to comp	lete this form.	1 Total pages Schedule A(J)1: Sch: 1/13 Rpt: 4/83
2 FILER NAME Spain Jr., C	harles A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065741
4 Date 06/28/2023	Full name of contributor	ate PAC (ID#:)	7 Amount of Contribution (\$) \$1,000.00
	Houston, TX 77010-2010		
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	is a child, law firm of parent(s) (if any)	I	
Date Full name of contributor out-of-state PAC 06/29/2023 Garcia, Roland Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00
	Houston, TX 77042-2501		
Contributor's Attorney	Principal Occupation	Contributor's Job Title Shareholder	
	employer/law firm	Law firm of contributor's s	spouse (if any)
Greenberg ⁻	Гraurig, LLР		
If contributor	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-sta	ate PAC (ID#:)	Amount of Contribution (\$)
06/30/2023	Houston, Sam		\$500.00
	Contributor address; City; State; Zip Cod	de	
	Houston, TX 77041-6600		
	Principal Occupation	Contributor's Job Title	
Attorney	employer/law firm	Senior Partner	engues (if any)
	ater, and Houston LLP	Law firm of contributor's s	pouse (ii arry)
	is a child, law firm of parent(s) (if any)	I	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 2/13 Rpt: 5/83
2	FILER NAME				3 Filer ID (Ethics Commission Filers) 00065741
_		harles A. (The Honorable)			
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	06/22/2023	Nobles, Jeffrey			\$250.00
		6 Contributor address; City;	State; Zip Code		
		Georgetown, TX 78628	-2384		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Senior Counsel	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Husch Black	well LLP			
12	! If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/26/2023	Padgett, Thomas	_		\$50.00
		Contributor address; City;	State; Zip Code		
		Bellaire, TX 77401-532	9		
	Contributor's	Principal Occupation	-	Contributor's Job Title	
	Attorney	Timolpai Godapation		Trial Lawyer	
_		employer/law firm		Law firm of contributor's s	enouse (if any)
	The Buenke			Law initi of contributor 3 c	pouse (ii dily)
_			if any)		
	ii contributor	is a child, law firm of parent(s) (n any)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/29/2023	Stam, Charles			\$150.00
		Contributor address; City;	State; Zip Code		···[
		Houston, TX 77006-442	20		
	Contributor's	Principal Occupation		Contributor's Job Title	
	Attorney			Associate	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Hinojosa La	w PLLC			
	If contributor	is a child, law firm of parent(s) (if any)	1	

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 3/13 Rpt: 6/83
2	FILER NAME Spain Jr., Ch	narles A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00065741
4	4 Date 06/20/2023 5 Full name of contributor out-of-state PAC (ID#:) Stokes, Macey 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		Houston, TX 77006-1825	5			
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Partner		
10	Contributor's e Baker Botts	employer/law firm LLP		11 Law firm of contributor's sp	ous	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 (\$)
	06/29/2023	Adcock, John Contributor address; City; S			•	\$5,000.00
	-	Houston, TX 77006-5018	}			
		Principal Occupation		Contributor's Job Title		
	Attorney			Of Counsel		or (if any)
	Beck Redde	employer/law firm n LLP		Law firm of contributor's sp	ous	se (II any)
		s a child, law firm of parent(s) (if	anv)			
	ii contributor i	o a orma, law mm or parent(s) (ii	arry			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/30/2023	Arnold, Kurt	_			\$5,000.00
		Contributor address; City; S Houston, TX 77007-7035			•	
	Contributor's I	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Arnold & Itki	n LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.		Total pages Schedule A(J)1: Sch: 4/13 Rpt: 7/83
2	FILER NAME Spain Jr., Ch	narles A. (The Honorable)				Filer ID (Ethics Commission Filers) 00065741
4	Date 06/21/2023 5 Full name of contributor out-of-state PAC (ID#:) Bracewell PAC 6 Contributor address; City; State; Zip Code		7 /	Amount of Contribution (\$) \$2,500.00		
		Houston, TX 77002-277	0			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oouse	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/28/2023	Cappolino Dodd Kreb Contributor address; City;	S LLP State; Zip Code			\$250.00
		Cameron, TX 76520-393	35 	T		
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
06/29/2023 Clark, Kenneth Contributor address; City; State; Zip Code				\$100.00		
		Houston, TX 77006-471	2			
		Principal Occupation		Contributor's Job Title		
	Cosmetologi	ist		Owner		
		employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Salon on Kir					
	If contributor is	s a child, law firm of parent(s) (if	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: 5/13 Rpt: 8/83
2	FILER NAME Spain Jr., Ch	narles A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00065741
4	4 Date 06/28/2023 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$50.00		
		Houston, TX 77006-5016	i 			
8		Principal Occupation		9 Contributor's Job Title		
		t Professional		Senior Managing Direct		
10		employer/law firm thodist Hospital Foundation		11 Law firm of contributor's sp	oous	se (if any)
12		s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/26/2023	Fogler, Brar, O'Neil & Gr. Contributor address; City; S	state; Zip Code			\$500.00
		Houston, TX 77010-1018	}			
	Contributor's F	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 (\$)
	06/27/2023	Fultz, Jon	_			\$250.00
		Contributor address; City; S Navasota, TX 77868-364			•	
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Partnet		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Fultz & Fultz	, PLLC				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete thi	s form.	1 Total pages Schedule A(J)1: Sch: 6/13 Rpt: 9/83
2	FILER NAME Spain Jr., Ch	narles A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065741
4	Date 06/26/2023	 5 Full name of contributor out-of-state PAC (III Gibbs, Robin 6 Contributor address; City; State; Zip Code Houston, TX 77002-5215 	7 Amount of Contribution (\$) \$1,500.00	
8	Contributor's I	I Principal Occupation	9 Contributor's Job Title	
	Attorney		Partner	
10	Contributor's 6	employer/law firm ns LLP	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 (II	D#:)	Amount of Contribution (\$)
	06/29/2023	Gordon, Carl Contributor address; City; State; Zip Code Houston, TX 77056-6709		\$100.00
	Contributor's I	Principal Occupation	Contributor's Job Title	
	Attorney		Owner	
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)
	The Gordon	Law Firm		
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (II	D#:)	Amount of Contribution (\$)
	06/22/2023	Haynes and Boone Political Action Committe Contributor address; City; State; Zip Code Dallas, TX 75219-7672	ee	. \$2,500.00
	Contributor's I	I Principal Occupation	Contributor's Job Title	
	Contributor's	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)		

	MONET	ARY POLITICAL	CONTRIBUTION	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: 7/13 Rpt: 10/83
2	FILER NAME Spain Jr., Ch	narles A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00065741
4	Date 06/22/2023 5 Full name of contributor out-of-state PAC (ID#:) Hicks Thomas LLP 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$500.00		
		Houston, TX 77002-274	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	e (if any)
12	2 If contributor is	s a child, law firm of parent(s) (if	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/26/2023	Husch Blackwell LLP Contributor address; City;	<u> </u>			\$500.00
		Saint Louis, MO 63105-	1706			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	ee (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
06/30/2023 Itkin, Jason Contributor address; City; State; Zip Code				\$5,000.00		
		Houston, TX 77007-703	5			
	Contributor's I Attorney	Principal Occupation		Contributor's Job Title Partner		
		employer/law firm		Law firm of contributor's sp	20110	eo (if any)
	Arnold & Itki			Law littl of contributors sp	Jous	e (ii ariy)
		s a child, law firm of parent(s) (if	f any)	<u> </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)1: Sch: 8/13 Rpt: 11/83	=
2	FILER NAME Spain Jr., Ch	narles A. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00065741	
4	06/28/2023 Kennedy, Patrick 6 Contributor address; City; State; Zip Code			7 Amount of Contribution (\$) \$250.00)	
8	Contributor's I	Miami, FL 33129-1737 Principal Occupation		9 Contributor's Job Title		_
Ŭ	Aviator	тпора Оссаратоп		Pilot		
10		employer/law firm rlines		11 Law firm of contributor's sp	pouse (if any)	_
12	If contributor i	s a child, law firm of parent(s) (if an	у)			_
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
06/18/2023 Kirkland, Steven Contributor address; City; State; Zip Code Nacogdoches, TX 75961-0346				\$1,000.00)	
	Contributor's I	Principal Occupation	3.13	Contributor's Job Title		_
	Attorney	тпора Оссаратоп		Lawyer		
		employer/law firm		Law firm of contributor's sp	nouse (if any)	_
	Lawyer				(,)	
		s a child, law firm of parent(s) (if an	у)			_
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)	=
	06/21/2023	Kretzer, Seth Contributor address; City; Sta Houston, TX 77019-6100	te; Zip Code		\$250.00)
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Attorney			Owner		
		employer/law firm		Law firm of contributor's sp	pouse (if any)	
	Law Office of	f Seth Kretzer				
	If contributor i	s a child, law firm of parent(s) (if an	у)			

	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: 9/13 Rpt: 12/83
2	FILER NAME	narles A. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00065741
4	Date 06/30/2023	Full name of contributor	D#:)	7 Amount of Contribution (\$) \$250.00
		Houston, TX 77005-2809		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	
	Attorney		Owner	
10		employer/law firm es Kronzer, III, P.C.	11 Law firm of contributor's s	pouse (if any)
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date 06/28/2023	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution (\$) \$2,500.00
		Contributor address; City; State; Zip Code The Woodlands, TX 77381-4159		
	Contributor's	I Principal Occupation	Contributor's Job Title	
	Attorney		Owner	
	Contributor's	employer/law firm =irm	Law firm of contributor's s	pouse (if any)
		s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor Out-of-state PAC (IE	D#:)	Amount of Contribution (\$)
	06/27/2023	Muñoz, Joseph		\$50.00
		Contributor address; City; State; Zip Code		
		Houston, TX 77066-2536		
		Principal Occupation	Contributor's Job Title	
	Student		Law Clerk	
		employer/law firm erson Law Firm	Law firm of contributor's s	pouse (if any)
		s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1 Total pages Schedule A(J)1: Sch: 10/13 Rpt: 13/83		
2	FILER NAME	RNAME			3 Filer ID (Ethics Commission Filers)
	Spain Jr., Cl	narles A. (The Honorable)			00065741
4	Date 06/20/2023	5 Full name of contributor Nichols, Robert	out-of-state PAC (ID#	:)	7 Amount of Contribution (\$) \$100.00
		6 Contributor address; City; State; Zip Code			
		Houston, TX 77030-410	3		
8	Contributor's I Attorney	Principal Occupation		9 Contributor's Job Title Partner	
10	Contributor's e	employer/law firm		11 Law firm of contributor's s	spouse (if any)
12	2 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 (\$)
	06/27/2023	Northrup, Michael			\$250.00
		Contributor address; City;	State; Zip Code		
		Dallas, TX 75206-6815			
	Contributor's I	Principal Occupation		Contributor's Job Title	
	Attorney			Shareholder	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Cowles & Th				
	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 (\$)
	06/28/2023	Patel, Sarah			\$1,000.00
		Contributor address; City;	State; Zip Code		···[
		Houston, TX 77005-161	3		
	Contributor's I	Principal Occupation		Contributor's Job Title	•
	Attorney			Partner	
		employer/law firm		Law firm of contributor's s	spouse (if any)
	Jackson Wa				
	If contributor i	s a child, law firm of parent(s) (i	f any)		

	MONET	ARY POLITICAL CO	ONTRIBUTIONS	6	SCHEDULE A(J)1
	The Instru	ction Guide explains how t	o complete this form		1 Total pages Schedule A(J)1: Sch: 11/13 Rpt: 14/83
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Spain Jr., C	narles A. (The Honorable)			00065741
4	Date 06/28/2023	Full name of contributor Perry, Brent Contributor address; City; State	7 Amount of Contribution (\$) \$500.00		
		Houston, TX 77010-1003			
8	Contributor's	Principal Occupation	9 (Contributor's Job Title	
	Attorney		Partner		
10	77010-1003	employer/law firm	ouse (if any)		
46			<u> </u>		
12	2 IT CONTRIBUTOR	s a child, law firm of parent(s) (if any	/)		
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/26/2023	Raffetto, Mary Kate			\$100.00
		Contributor address; City; State	e; Zip Code		
		, , , , , , , , , , , , , , , , , , , ,	, ,		
		Houston, TX 77018-5818			
	Contributor's	Principal Occupation	(Contributor's Job Title	L
	Attorney		A	Associate	
	Contributor's	employer/law firm	L	aw firm of contributor's sp	ouse (if any)
	Beck Redde	n LLP			
	If contributor	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 (\$)
	06/28/2023	Smith, Jordan	<u> </u>		\$20.00
		Contributor address; City; State	e; Zip Code		
		Houston, TX 77266-6694			
	Contributor's	Principal Occupation	(Contributor's Job Title	
	Envision Su	stainability Professional	F	Planning Manager	
	Contributor's	employer/law firm	L	aw firm of contributor's sp	ouse (if any)
	Harris Coun	ty			
	If contributor	s a child, law firm of parent(s) (if any	')		
l					

	MONET	ARY POLITICAL C	ONTRIBUTIO	DNS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 12/13 Rpt: 15/83
2	FILER NAME Spain Jr., Ch	narles A. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00065741
4	Date 06/29/2023	 5 Full name of contributor Sorrels, Randall 6 Contributor address; City; States Houston, TX 77007-8250 		7 Amount of Contribution (\$) \$1,000.00	
8	Contributor's F	Principal Occupation		9 Contributor's Job Title	1
	Attorney			Partner	
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	pouse (if any)
	Sorrels Law			Sorrels Law	
12	If contributor is	s a child, law firm of parent(s) (if ar	ıy)	l	
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
O6/30/2023 Soucier, Lawrence Contributor address; City; State; Zip Code Austin, TX 78738-1800			te; Zip Code		. \$250.00
	Contributor's I	rincipal Occupation		Contributor's Job Title	
	Retired			None	
	Contributor's employer/law firm			Law firm of contributor's sp	pouse (if any)
	None				
	If contributor is	s a child, law firm of parent(s) (if ar	ıy)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/29/2023	Svetlik, Frank			\$10.00
		Contributor address; City; Sta Houston, TX 77024-1652	te; Zip Code		
	Contributor's Principal Occupation Contributor's Job Title				
	Attorney			Owner	
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)
	Frank Svetlil	(
	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 how	v to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 13/13 Rpt: 16/83
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Spain Jr., C	harles A. (The Honorable)			00065741
4	Date	5 Full name of contributor	7 Amount of Contribution (\$)		
	06/30/2023	Thomas, Cheri 6 Contributor address; City; Si	\$100.00		
		Houston, TX 77056-1808			
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Attorney			Partner	
10	0 Contributor's employer/law firm 11 Law firm of contributor's				spouse (if any)
	Lewis Thom	as Law PC			
12	2 If contributor	s a child, law firm of parent(s) (if a	any)	l	
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/22/2023	Van de Putte, Leticia			\$500.00
		Contributor address; City; S	tate; Zip Code		··
			, ,		
		Castle Hills, TX 78213-33	31		
-	Contributor's	I Principal Occupation		Contributor's Job Title	1
	Lobbist			President	
-	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
		n de Putte & Associates			
-	If contributor i	s a child, law firm of parent(s) (if a	any)		
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/29/2023	Whellan, Michael			\$150.00
		Contributor address; City; S	tate: Zip Code		
		, , ,	, p		
		Austin, TX 78731-5206			
-	Contributor's	I Principal Occupation		Contributor's Job Title	1
	Attorney			Lawyer	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
		Brown, PLLC			
-		s a child, law firm of parent(s) (if a	any)		
			- 7,		

PLEDGED	CONTRIBUTIONS (JUDICI	AL)		SCHEDULE B(J)
The Insti	ruction Guide explains how to comple	te this form.	1 Total pages Sche Sch: 1/1 Rpt: 1	
2 FILER NAME Spain Jr., Charle	es A. (The Honorable)		3 Filer ID (Ett 00065741	nics Commission Filers)
4 TOTAL OF UN	IITEMIZED PLEDGES			\$ 0.00
5 Date 06/29/2023	6 Full name of pledgor out-of-state PAC (ID#:_Porter Hedges LLP 7 Pledgor Address; City; State; Zip		8 Amount of pledge (\$) \$1,000.00	9 In-kind description (If applicable)
	Houston, TX 77002-6341		Check if travel out	់ tside of Texas. Complete Schedule T.
10 Pledgor's principal	I occupation	11 Pledgor's job title	<u> L</u>	
12 Pledgor's employe	er/law firm	13 Law firm of pledgor's	spouse (if any)	
14 If pledgor is a child	d, law firm of parent(s) (if any)	1		
Date	Full name of pledgorout-of-state PAC (ID#:_)	Amount of	In-kind description
	The Ammons Law Firm LLP		pledge (\$) \$2,500.00	(If applicable)
06/29/2023	Pledgor Address; City; State; Zip	Code	Ψ2,500.00	
	Houston, TX 77006-4624		Check if travel out	I I tside of Texas. Complete Schedule T.
Pledgor's principal	occupation	Pledgor's job title		
Pledgor's employe	r/law firm	Law firm of pledgor's	spouse (if any)	
If pledgor is a child	d, law firm of parent(s) (if any)	•		

	LOANS (J	UDICIAL)				SCHE	OULE E	(J)
	The Instructio	form.	1 Total pages Schedule E(J): Sch: 1/1 Rpt: 18/83					
2	FILER NAME Spain Jr., Charle	es A. (The Honorable)		1	Filer ID 000657	(Ethics Con	nmission Fil	lers)
4	TOTAL OF UN	ITEMIZED LOANS		•		\$		0.00
5	Date of loan	7 Name of lender out-of-state Pr	AC (ID#:)	9 Loan Am	ount (\$)	
6	Is lender a financial institution?	8 Lender address; City; State;	Zip Code			10 Interest i		
						11 Maturity	Date	
12	2 Lender's Principal	Occupation	13 Lender's Job Title					
14	1 Lender's Employer	/Law Firm	15 Law Firm of lender's spous	se (if	any)			
16	If lender is child, la	w firm of parent(s) (if any)	1					
17	7 Description of Coll	ateral	18 Check if personal funds we	ere d	eposited	l into political (See Ins		
19	GUARANTOR INFORMATION	20 Name of guarantor				22 Amount	Guaranteed	l (\$)
23	not applicable not applicable	21 Guarantor address; City; State; Dal Occupation	Zip Code 24 Guarantor's Job Title					
25	5 Guarantor's Emplo	over/Law Firm	26 Law Firm of guarantor's sp	nni se	(if any)			
	· 		20 Law Film Organiamor 5 Sp		, (ii airy)			
27	' If guarantor is child	d, 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

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

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

	Contributing Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/3 Rpt: 19/83	Spain Jr., Charles A. (The Honorable) 00065741
4	Date	5 Payee name
	06/01/2023	Harris County Democratic Party
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$600.00	4619 Lyons Avenue
		Houston, TX 77020-4304
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
		Food for Harris County Democratic Party CEC on 6/4/2023
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/21/2023	Raise the Money, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.89	Post Office Box 26466
	φ37.09	FOST OTHER BOX 20400
		Little Rock, AR 72221-6466
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online fundraising processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	06/22/2023	Raise the Money, Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.50	Post Office Box 26466
	Ψ12.30	1 03t Office Box 20400
		Little Rock, AR 72221-6466
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Online fundraising processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 2/3 Rpt: 20/83	Spain Jr., Charles A. (The Honorable) 00065741
4 Date	5 Payee name
06/25/2023	Raise the Money, Inc.
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$37.25	Post Office Box 26466
	Little Rock, AR 72221-6466
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Online fundraising processing fee
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
06/27/2023	Raise the Money, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$106.35	Post Office Box 26466
	Little Rock, AR 72221-6466
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Online fundraising processing fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
06/28/2023	Raise the Money, Inc.
Amount (\$)	Payee address; City; State; Zip Code
\$27.70	Post Office Box 26466
	Little Rock, AR 72221-6466
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Online fundraising processing fee
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memo Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gitt/Awards/Memorials Expense Printing Expense			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:	2 511 51					3	Filer ID	(Ethics Commission Filer	re)
	Sch: 3/3 Rpt: 21/83		n Jr., Charles A. (Th	ne Honorable)				00065741	(Ethics Commission File)	15)
4	Date	5 Paye	e name							
	06/29/2023	Rais	e the Money, Inc.							
6	Amount (\$) \$225.68	Post	e address; City; Office Box 26466 Rock, AR 72221-64	State; Zip	Code					
8	PURPOSE OF EXPENDITURE		gory (See Categories listed punting/Banking	at the top of this schedule)	(b)	ш	ı, TX	side of Texas. Com c, officeholder living ng processir	expense	
9	Complete ONLY if direct expenditure to benefit C/OI		late/Officeholder name	e Office	sought			Office he	eld	

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/36 Rpt: 22/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/17/2023 Allison Wilkins Photography Amount (\$) Payee address; State; Zip Code \$378.88 1813 Crockett Street Houston, TX 77007-4022 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Headshot 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/03/2023 Area 5 Democrats Amount (\$) Payee address; City; State; Zip Code \$50.00 Post Office Box 608 Pasadena, TX 77501-0608 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Gala Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/36 Rpt: 23/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/17/2023 Asian American Bar Association of Houston (AABA) Amount (\$) Payee address; City; State; Zip Code \$30.00 950 Echo Lane Suite 360 Houston, TX 77024-2794 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/16/2023 **Bay Area Democratic Movement** Amount (\$) Payee address; City; State; Zip Code \$25.00 4821 NASA Parkway Apt. 16E Seabrook, TX 77586-6551 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/36 Rpt: 24/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/16/2023 Bay Area New Democrats (BAND) Amount (\$) Payee address; City; State; Zip Code Post Office Box 890381 \$20.00 Houston, TX 77289-0381 **TYPE OF** Political Non-Political Χ **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/16/2023 **Bayou Blue Democrats** Amount (\$) Payee address; City; State; Zip Code \$25.00 2111 Welch Street Apt. B312 Houston, TX 77019-5654 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/36 Rpt: 25/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/19/2023 Bellaire/Braeswood Democrats Amount (\$) Payee address; City; State; Zip Code \$20.00 807 Jaquet Drive Bellaire, TX 77401-2814 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 **Braes Oaks Democrats** Amount (\$) Payee address; City; State; Zip Code \$20.00 10907 Villa Lea Lane Houston, TX 77071-1519 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/36 Rpt: 26/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Pearland, TX 77584-4912 **TYPE OF** Political Non-Political Χ **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Pearland, TX 77584-4912 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/36 Rpt: 27/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Pearland, TX 77584-4912 **TYPE OF** Political Non-Political Χ **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Pearland, TX 77584-4912 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/36 Rpt: 28/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Pearland, TX 77584-4912 **TYPE OF** Political Non-Political Χ **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Pearland, TX 77584-4912 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/36 Rpt: 29/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/13/2023 **Constant Contact** Amount (\$) Payee address; State; Zip Code City; \$79.95 1601 Trapelo Road Suite 329 Waltham, MA 02451-7357 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Email marketing** 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/25/2023 Costco Payee address: Amount (\$) City; State; Zip Code \$6.66 3836 Richmond Avenue Houston, TX 77027-5802 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Food for fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/36 Rpt: 30/83 Spain Jr., Charles A. (The Honorable) 00065741 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 06/03/2023 Cypress-Tomball Democrats Amount (\$) Payee address; State; Zip Code 16215 Diamond Rock Drive \$25.00 Cypress, TX 77429-2465 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Democratic Club of The Woodlands Amount (\$) Payee address; City; State; Zip Code \$50.00 Post Office Box 133321 The Woodlands, TX 77393-3321 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/36 Rpt: 31/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/16/2023 Democratic Law Students at South Texas College of Law Houston Amount (\$) Payee address; City; State; Zip Code \$25.00 1303 San Jacinto Street Houston, TX 77002-7000 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name **Democratic National Committee** 01/16/2023 Amount (\$) Payee address; City; State; Zip Code \$100.00 430 South Capitol Street Southeast Washington, DC 20003-4024 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/36 Rpt: 32/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Sugar Land, TX 77498-7006 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Sugar Land, TX 77498-7006 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 12/36 Rpt: 33/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 03/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Sugar Land, TX 77498-7006 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Sugar Land, TX 77498-7006 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 13/36 Rpt: 34/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 05/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Sugar Land, TX 77498-7006 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Sugar Land, TX 77498-7006 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/36 Rpt: 35/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/22/2023 Galveston County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$15.00 Post Office Box 1071 La Marque, TX 77568-1071 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2023 Galveston County Democratic Party Amount (\$) Payee address; State; Zip Code \$15.00 Post Office Box 1071 La Marque, TX 77568-1071 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 15/36 Rpt: 36/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/22/2023 Galveston County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$15.00 Post Office Box 1071 La Marque, TX 77568-1071 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/22/2023 Galveston County Democratic Party Amount (\$) Payee address; State; Zip Code \$15.00 Post Office Box 1071 La Marque, TX 77568-1071 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 16/36 Rpt: 37/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/22/2023 Galveston County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$15.00 Post Office Box 1071 La Marque, TX 77568-1071 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2023 Galveston County Democratic Party Amount (\$) Payee address; State; Zip Code \$15.00 Post Office Box 1071 La Marque, TX 77568-1071 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/36 Rpt: 38/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/16/2023 Greater Heights Democratic Club Amount (\$) Payee address; City; State; Zip Code \$20.00 4619 Lyons Avenue Houston, TX 77020-4304 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Houston, TX 77020-4304 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/36 Rpt: 39/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Houston, TX 77020-4304 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Houston, TX 77020-4304 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 19/36 Rpt: 40/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Houston, TX 77020-4304 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Houston, TX 77020-4304 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 20/36 Rpt: 41/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Houston, TX 77020-4304 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Harris County Tejano Democrats Amount (\$) Payee address; City; State; Zip Code \$25.00 414 Cherry Springs Lane Suite A Spring, TX 77373-8185 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 21/36 Rpt: 42/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/05/2023 Harris County Tejano Democrats Amount (\$) Payee address; City; State; Zip Code \$25.00 414 Cherry Springs Lane Spring, TX 77373-8185 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Harris County Young Democrats Amount (\$) Payee address; City; State; Zip Code \$50.00 Post Office Box 131672 Houston, TX 77219-1672 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 22/36 Rpt: 43/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/25/2023 Hispanic Bar Association of Houston (HisBA) Amount (\$) Payee address; City; State; Zip Code \$50.00 Post Office Box 3611 Houston, TX 77253-3611 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Houston Black American Democrats (H-BAD) Amount (\$) Payee address; City; State; Zip Code \$250.00 4806 Edfield Street Houston, TX 77033-3508 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 23/36 Rpt: 44/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 03/05/2023 Houston GLBT Political Caucus Amount (\$) Payee address; City; State; Zip Code \$250.00 Post Office Box 66664 Houston, TX 77266-6664 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Gala 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/15/2023 Houston Lawyers Association, Inc. (HLA) Amount (\$) Payee address; City; State; Zip Code \$83.00 Post Office Box 300009 Houston, TX 77230-0009 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 24/36 Rpt: 45/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/30/2023 Houston Lawyers Association, Inc. (HLA) Amount (\$) Payee address; City; State; Zip Code \$100.00 Post Office Box 300009 Houston, TX 77230-0009 **TYPE OF** Political Non-Political Χ **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Gala 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Houston Stonewall Young Democrats Amount (\$) Payee address; City; State; Zip Code \$50.00 Post Office Box 61002 Houston, TX 77208-1002 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 25/36 Rpt: 46/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/16/2023 **Humble Area Democrats** Amount (\$) Payee address; City; State; Zip Code \$10.00 Post Office Box 3863 Humble, TX 77347-3863 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/07/2023 Hypermart Amount (\$) Payee address; City; State; Zip Code \$31.91 10 Corporate Drive Suite 300 Burlington, MA 01803-4200 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 26/36 Rpt: 47/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/04/2023 Hypermart Amount (\$) Payee address; State; Zip Code City; \$206.83 10 Corporate Drive Suite 300 Burlington, MA 01803-4200 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Website 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/08/2023 LGBTQ+ Victory Fund Amount (\$) Payee address; City; State; Zip Code \$275.00 1225 I Street Northwest Suite 525 Washington, DC 20005-6005 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Gala Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 27/36 Rpt: 48/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 03/05/2023 LGBTQ+ Victory Fund Amount (\$) Payee address; State; Zip Code \$500.00 1225 I Street Northwest Suite 525 Washington, DC 20005-6005 TYPE OF Political Non-Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Donation 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Labor Council for Latin American Advancement (LCLAA) Amount (\$) Payee address; City; State; Zip Code \$10.00 815 Black Lives Matter Plaza Northwest Washington, DC 20006-4101 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 28/36 Rpt: 49/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/16/2023 Mexican-American Bar Association of Houston (MABAH) Amount (\$) Payee address; City; State; Zip Code \$75.00 Post Office Box 303 Houston, TX 77001-0303 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/16/2023 Meyerland Area Democrats Club Amount (\$) Payee address; City; State; Zip Code \$25.00 Post Office Box 310061 Houston, TX 77231-0061 TYPE OF Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Event Expense Fees Food/Beverage Expense Polling Expense Travel in District Gift/Awards/Memorials Expense Legal Services Travel Out of District OTHER (enter a category not listed above) Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 29/36 Rpt: 50/83 Spain Jr., Charles A. (The Honorable) 00065741

TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED TO A CREDIT CARD
5 Date 02/27/2023	6 Payee name National LGBTQ+ Bar Association
7 Amount (\$) \$100.00	8 Payee address; City; State; Zip Code 1701 Rhode Island Avenue Northwest Washington, DC 20036-3001
9 TYPE OF EXPENDITURE	X Political Non-Political
10 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 Membership
11 Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held H
Date 06/18/2023	Payee name North Brazoria Democratic Club
Amount (\$) \$25.00	Payee address; City; State; Zip Code 55 Pin Oak Court Lake Jackson, TX 77566-5928
TYPE OF EXPENDITURE	X Political Non-Political
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 Membership
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 30/36 Rpt: 51/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/16/2023 Oak Forest Area Democrats Amount (\$) Payee address; City; State; Zip Code \$10.00 6111 West 43rd Street Houston, TX 77092-5014 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/23/2023 Phoenicia Specialty Foods Amount (\$) Payee address; City; State; Zip Code \$137.60 1001 Austin Street Houston, TX 77010-3005 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Food for fundraiser Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 31/36 Rpt: 52/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/29/2023 Phoenicia Specialty Foods Amount (\$) Payee address; State; Zip Code \$8.38 1001 Austin Street Houston, TX 77010-3005 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. **Event Expense EXPENDITURE** Check if Austin, TX, officeholder living expense Food for fundraiser 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/19/2023 Raise the Money, Inc. Amount (\$) Payee address; City; State; Zip Code \$25.00 Post Office Box 26466 Little Rock, AR 72221-6466 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** Check if Austin, TX, officeholder living expense Fundraising platform fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 32/36 Rpt: 53/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/16/2023 Rice Young Democrats Amount (\$) Payee address; State; Zip Code \$25.00 Post Office Box 1892 Houston, TX 77251-1892 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 River Oaks Area Democratic Women (ROADwomen) Amount (\$) Payee address; City; State; Zip Code \$50.00 13527 North Tracewood Bend Houston, TX 77077-1536 TYPE OF Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 33/36 Rpt: 54/83 Spain Jr., Charles A. (The Honorable) 00065741 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 06/03/2023 South Asian Bar Association (SABA) Amount (\$) Payee address; City; State; Zip Code \$100.00 1221 McKinney Street **Suite 2860** Houston, TX 77010-1078 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Gala 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/13/2023 South Brazoria County Democrats Amount (\$) Payee address; City; State; Zip Code \$100.00 55 Pin Oak Court Lake Jackson, TX 77566-5928 TYPE OF Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 34/36 Rpt: 55/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/16/2023 Southwest Democrats Amount (\$) Payee address; State; Zip Code \$20.00 Post Office Box 2053 Bellaire, TX 77402-2053 TYPE OF Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Spring Branch Democrats Amount (\$) Payee address; City; State; Zip Code \$20.00 Post Office 550161 Houston, TX 77255-0161 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 35/36 Rpt: 56/83 Spain Jr., Charles A. (The Honorable) 00065741 4 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 01/16/2023 Spring Democratic Club Amount (\$) Payee address; State; Zip Code \$25.00 618 Spring Cypress Road Spring, TX 77373-2526 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 **Texas Democratic Party** Amount (\$) Payee address; City; State; Zip Code \$250.00 Post Office Box 15707 Austin, TX 78761-5707 **TYPE OF** Non-Political Political Χ **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 36/36 Rpt: 57/83 Spain Jr., Charles A. (The Honorable) 00065741 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/23/2023 Texas Democratic Women of Harris County Metro Area Amount (\$) Payee address; City; State; Zip Code \$10.00 4619 Lyons Avenue Suite A Houston, TX 77020-4304 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Membership 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 West Houston Democrats Amount (\$) Payee address; City; State; Zip Code \$25.00 13114 Waldemere Drive Houston, TX 77077-5513 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/26 Rpt: 58/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 05/17/2023 Allison Wilkins Photography Amount (\$) Payee address; City; State; Zip Code \$378.88 1813 Crockett Street Reimbursement from political contributions Х intended Houston, TX 77007-4022 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Headshot Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/03/2023 Area 5 Democrats Amount (\$) Payee address; City; State; Zip Code \$50.00 Post Office Box 608 Reimbursement from political contributions Χ Pasadena, TX 77501-0608 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Gala Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/17/2023 Asian American Bar Association of Houston (AABA) Payee address; City; State; Zip Code Amount (\$) \$30.00 950 Echo Lane Suite 360 Reimbursement from political contributions intended X Houston, TX 77024-2794 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/26 Rpt: 59/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 06/15/2023 Bay Area Association of Democratic Women (BAAD Women) State; Zip Code Amount (\$) Payee address; City: \$30.00 15918 Cavendish Drive Reimbursement from political contributions Х intended Houston, TX 77059-4615 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Bay Area Democratic Movement Amount (\$) Payee address; City; State; Zip Code \$25.00 4821 NASA Parkway Apt. 16E Reimbursement from political contributions Χ Seabrook, TX 77586-6551 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Bay Area New Democrats (BAND) Payee address; City; State; Zip Code Amount (\$) \$20.00 Post Office Box 890381 Reimbursement from Χ political contributions intended Houston, TX 77289-0381 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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	- I Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Ex Printing E		Tra Tra	avel in District avel Out of District FHER (enter a category not list	·
	Credit Card Payment		The Instruction Guide expla	ins how to co	omplete this form.			
1	Total pages Schedule G:	2 FILER	NAME			3 Fil	ler ID (Ethics Comm	ission Filers)
	Sch: 3/26 Rpt: 60/83	Spain	Jr., Charles A. (The Honorabl	e)		00	0065741	
4	Date	5 Payee	name					
	01/16/2023		Blue Democrats					
6	Amount (\$)	7 Payee	address; City; Sta	ate; Zip Co	ode			
	\$25.00	2111 \	Welch Street					
	Reimbursement from	Apt. E	3312					
	X political contributions intended	Houst	on, TX 77019-5654					
8	PURPOSE	(a) Catego	ry (See Categories listed at the top of this	schedule)	(b) Description	_	c if travel outside of Texas. Co	•
	OF EXPENDITURE	Contri	butions/Donations Made By			Check	c if Austin, TX, officeholder living	ng expense
	EXI ENDITORE	Candi	date/Officeholder/Political Cor	nmittee	Membership			
9	Complete ONLY if direct	Candidate/	Officeholder name		Office sought		Office held	
	expenditure to benefit C/OH							
	Date	Payee	name					
	05/19/2023		e/Braeswood Democrats					
	Amount (\$)	Pavee	address; City; Sta	ate; Zip Co	ode			
	\$20.00		aguet Drive	, ,				
	Reimbursement from							
	x political contributions intended	Bellair	e, TX 77401-2814					
	PURPOSE	Catego	ry (See Categories listed at the top of this	schedule)	Description [Check	c if travel outside of Texas. Co	mplete Schedule T.
	OF EXPENDITURE		butions/Donations Made By			Check	c if Austin, TX, officeholder living	ng expense
	EXI ENDITORE	Candi	date/Officeholder/Political Cor	nmittee	Membership			
	•	Candidate/	Officeholder name		Office sought		Office held	
	expenditure to benefit C/OH							
	Date	Payee						
	01/16/2023	Braes	Oaks Democrats					
	Amount (\$)	-	•	ate; Zip Co	ode			
	\$20.00	10907	Villa Lea Lane					
	Reimbursement from political contributions							
	intended	Houst	on, TX 77071-1519					
	PURPOSE	Catego	(See Categories listed at the top of this	schedule)	Description	=	k if travel outside of Texas. Co	•
	OF EXPENDITURE		butions/Donations Made By		L	Check	c if Austin, TX, officeholder livir	ng expense
	-	Candi	date/Officeholder/Political Cor	nmittee	Membership			
L								
		Candidate/	Officeholder name		Office sought		Office held	
	expenditure to benefit C/OH							
\vdash								

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/26 Rpt: 61/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 01/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Reimbursement from political contributions Х intended Pearland, TX 77584-4912 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2023 Brazoria County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$20.00 4010 Lotus Drive Reimbursement from political contributions Χ Pearland, TX 77584-4912 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2023 Brazoria County Democratic Party State; Zip Code Amount (\$) Payee address; City; \$20.00 4010 Lotus Drive Reimbursement from Χ political contributions intended Pearland, TX 77584-4912 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

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

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/W The Instruction Guide explains how to con	ages/Contract Labor mplete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAME	3	Filer ID (Ethics Commission Filers)
	Sch: 5/26 Rpt: 62/83	Spain Jr., Charles A. (The Honorable)		00065741
4	Date	5 Payee name		
	04/22/2023	Brazoria County Democratic Party		
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de	
	\$20.00	4010 Lotus Drive		
	Reimbursement from			
	X political contributions intended	Pearland, TX 77584-4912		
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	Contributions/Donations Made By		Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee	Membership	
9	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
	Date	Payee name		
	05/22/2023	Brazoria County Democratic Party		
	Amount (\$)	Payee address; City; State; Zip Coo		
	\$20.00	4010 Lotus Drive		
	Reimbursement from	loro zotac zinto		
	political contributions intended	Pearland, TX 77584-4912		
	PURPOSE	Category (See Categories listed at the top of this schedule)	· <u>–</u>	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By		Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee	Membership	
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
	Date	Payee name		
	06/22/2023	Brazoria County Democratic Party		
	Amount (\$)	Payee address; City; State; Zip Coo	de	
	\$20.00	4010 Lotus Drive		
	Reimbursement from			
	X political contributions intended	Pearland, TX 77584-4912		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By		Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee	Membership	
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, _ I Co	Fees Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ov Polling Ex Printing E Salaries/A	Expense Wages/Contract Labor	Solicitation/Fundrashing 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 NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 6/26 Rpt: 63/83		Spain Jr., Charles A. (The Honorable)			00065741
4	Date	5	Payee name			
	06/13/2023		Constant Contact			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode	
	\$79.95		1601 Trapelo Road			
	Reimbursement from		Suite 329			
	X political contributions intended					
	Interlaca		Waltham, MA 02451-7357			
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	dule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Advertising Expense		L	Check if Austin, TX, officeholder living expense
					Email marketing	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held
	Date		Payee name			
	06/25/2023		Costco			
	Amount (\$)		Payee address; City; State;	Zip Co	ode	
	\$6.66		3836 Richmond Avenue			
	Reimbursement from					
	y political contributions intended		Houston, TX 77027-5802			
	PURPOSE		Category (See Categories listed at the top of this sche	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Event Expense			Check if Austin, TX, officeholder living expense
	LAFENDITORE				Food	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Officeholder name		Office sought	Office held
	Date		Payee name			
	06/03/2023		Cypress-Tomball Democrats			
	Amount (\$)		Payee address; City; State;	Zip Co	ode	
	\$25.00		16215 Diamond Rock Drive			
	Reimbursement from					
	political contributions intended		Cypress, TX 77429-2465			
	PURPOSE		Category (See Categories listed at the top of this scheen	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Contributions/Donations Made By			Check if Austin, TX, officeholder living expense
	LAFENDITORE		Candidate/Officeholder/Political Commit	ttee	Membership	
	Complete ONLY if direct	Car	ndidate/Officeholder name		Office sought	Office held
	expenditure to benefit					
	C/OH					

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/26 Rpt: 64/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 01/16/2023 Democratic Club of The Woodlands Payee address; Amount (\$) City: State; Zip Code \$50.00 Post Office Box 133321 Reimbursement from political contributions Х intended The Woodlands, TX 77393-3321 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Democratic Law Students at South Texas College of Law Houston Amount (\$) Payee address; City; State; Zip Code \$25.00 1303 San Jacinto Street Reimbursement from political contributions Χ Houston, TX 77002-7000 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 **Democratic National Committee** City; State; Zip Code Amount (\$) Payee address; \$100.00 430 South Capitol Street Southeast Reimbursement from Χ political contributions intended Washington, DC 20003-4024 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

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

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense Polling Expense
Printing Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		· ·	/ages/Contract Labor		OTHER (enter a category not listed above)
			The Instruction Guide explains how to co	mpiete this form.		
1	Total pages Schedule G:	2	FILER NAME		3	Filer ID (Ethics Commission Filers)
	Sch: 8/26 Rpt: 65/83		Spain Jr., Charles A. (The Honorable)			00065741
4	Date	5	Payee name			
	01/22/2023		Fort Bend County Democratic Party			
6	Amount (\$)	7	Payee address; City; State; Zip Co	de		
	\$25.00		11418 Oak Lake Ridge Court			
	Reimbursement from					
	x political contributions intended		Sugar Land, TX 77498-7006			
Ļ		_		<u>-</u>	7	
8	PURPOSE OF	(a)		(b) Description	≓ .	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee	L.		leck if Austin, 17, officerolder living expense
			Candidate/Officeriolder/Folitical Committee	Membership		
9	Complete ONLY if direct expenditure to benefit	Car	ndidate/Officeholder name	Office sought		Office held
	C/OH					
F		_				
	Date		Payee name			
	02/22/2023		Fort Bend County Democratic Party			
	Amount (\$)		Payee address; City; State; Zip Co	de		
	\$25.00		11418 Oak Lake Ridge Court			
	Reimbursement from					
	X political contributions intended		Sugar Land, TX 77498-7006			
Г	PURPOSE		Category (See Categories listed at the top of this schedule)	Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF		Contributions/Donations Made By		CI	neck if Austin, TX, officeholder living expense
	EXPENDITURE		Candidate/Officeholder/Political Committee	Membership		
Г	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held
	expenditure to benefit C/OH					
L	C/OIT					
	Date		Payee name			
	03/22/2023		Fort Bend County Democratic Party			
Г	Amount (\$)		Payee address; City; State; Zip Co	de		
	\$25.00		11418 Oak Lake Ridge Court			
	Reimbursement from					
	X political contributions intended		Sugar Land, TX 77498-7006			
⊢	PURPOSE	┝	Category (See Categories listed at the top of this schedule)	Description	7 ci	neck if travel outside of Texas. Complete Schedule T.
	OF		Contributions/Donations Made By		=	neck if Austin, TX, officeholder living expense
	EXPENDITURE			Membership	_	
\vdash	Complete ONLY if direct	Car	ndidate/Officeholder name	Office sought		Office held
1	expenditure to benefit	Jai	Madate/Officeriolaer Hame	Onice Sought		Office field
	C/OH					
Г						

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/26 Rpt: 66/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 04/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Reimbursement from political contributions Х intended Sugar Land, TX 77498-7006 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/22/2023 Fort Bend County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$25.00 11418 Oak Lake Ridge Court Reimbursement from political contributions Χ Sugar Land, TX 77498-7006 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2023 Fort Bend County Democratic Party Payee address; State; Zip Code Amount (\$) City; \$25.00 11418 Oak Lake Ridge Court Reimbursement from Χ political contributions intended Sugar Land, TX 77498-7006 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/26 Rpt: 67/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 01/22/2023 Galveston County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$15.00 Post Office Box 1071 Reimbursement from political contributions Х intended La Marque, TX 77568-1071 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/22/2023 Galveston County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$15.00 Post Office Box 1071 Reimbursement from political contributions Χ La Marque, TX 77568-1071 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/22/2023 Galveston County Democratic Party Payee address; City; State; Zip Code Amount (\$) \$15.00 Post Office Box 1071 Reimbursement from Χ political contributions intended La Marque, TX 77568-1071 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/26 Rpt: 68/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 04/22/2023 Galveston County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$15.00 Post Office Box 1071 Reimbursement from political contributions Х intended La Marque, TX 77568-1071 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/22/2023 Galveston County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$15.00 Post Office Box 1071 Reimbursement from political contributions Χ La Marque, TX 77568-1071 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2023 Galveston County Democratic Party Payee address; City; State; Zip Code Amount (\$) \$15.00 Post Office Box 1071 Reimbursement from Χ political contributions intended La Marque, TX 77568-1071 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 12/26 Rpt: 69/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 01/16/2023 Greater Heights Democratic Club Amount (\$) Payee address; City; State; Zip Code \$20.00 4619 Lyons Avenue Reimbursement from political contributions Х intended Houston, TX 77020-4304 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Reimbursement from political contributions Χ Houston, TX 77020-4304 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 03/01/2023 Harris County Democratic Party Payee address; City; State; Zip Code Amount (\$) \$60.00 4619 Lyons Avenue Suite A Reimbursement from Χ political contributions intended Houston, TX 77020-4304 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 13/26 Rpt: 70/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 04/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Reimbursement from political contributions Х intended Houston, TX 77020-4304 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/01/2023 Harris County Democratic Party Amount (\$) Payee address; City; State; Zip Code \$60.00 4619 Lyons Avenue Suite A Reimbursement from political contributions Χ Houston, TX 77020-4304 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2023 Harris County Democratic Party Payee address; City; State; Zip Code Amount (\$) \$60.00 4619 Lyons Avenue Suite A Reimbursement from

Houston, TX 77020-4304

Candidate/Officeholder name

Category (See Categories listed at the top of this schedule)

Candidate/Officeholder/Political Committee

Contributions/Donations Made By

Χ

C/OH

political contributions intended

Complete ONLY if direct

expenditure to benefit

PURPOSE

OF

EXPENDITURE

Description

Office sought

Membership

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE **G**

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Com	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ov Polling Ex Printing E Salaries/V	xpense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
_	Tatal magga Cabadyla Cy	۱ .	•			2	Files ID (Fabine Commission Filess)
1	Total pages Schedule G: Sch: 14/26 Rpt: 71/83	1	FILER NAME Spain Jr., Charles A. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00065741
4	Date	5 F	Payee name				
	06/04/2023	1	Harris County Democratic Party				
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode		
	\$2,500.00	4	4619 Lyons Avenue				
	Reimbursement from	(Suite A				
	X political contributions intended	ŀ	Houston, TX 77020-4304				
8	PURPOSE	(a) (Category (See Categories listed at the top of this sched	dule)	(b) Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Contributions/Donations Made By			CI	heck if Austin, TX, officeholder living expense
		'	Candidate/Officeholder/Political Commit	ttee	Pride parade		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cano	didate/Officeholder name		Office sought		Office held
	Date	F	Payee name				
	01/01/2023	1	Harris County Democratic Party				
	Amount (\$)	F	Payee address; City; State;	Zip Co	ode		
	\$60.00	4	4619 Lyons Avenue				
	Reimbursement from		Suite A				
	X political contributions intended		Houston, TX 77020-4304				
	PURPOSE		Category (See Categories listed at the top of this scher	dule)	Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF	1	Contributions/Donations Made By	.,	· [cı	neck if Austin, TX, officeholder living expense
	EXPENDITURE		Candidate/Officeholder/Political Commit	ttee	Membership		
	Complete ONLY if direct expenditure to benefit	Cano	lidate/Officeholder name		Office sought		Office held
	C/OH						
	Dete	_					
	Date 01/16/2023		Payee name Harris County Tejano Democrats				
		├					
	Amount (\$)	1		Zip Co	ode		
	\$25.00	1	414 Cherry Springs Lane				
	Reimbursement from political contributions	{	Suite A				
	intended	!	Spring, TX 77373-8185				
	PURPOSE	(Category (See Categories listed at the top of this sched	dule)	Description	CI	neck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Contributions/Donations Made By			CI	heck if Austin, TX, officeholder living expense
		(Candidate/Officeholder/Political Commit	ttee	Membership		
L							
	expenditure to benefit	Cand	didate/Officeholder name		Office sought		Office held
	C/OH						

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 15/26 Rpt: 72/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 04/05/2023 Harris County Tejano Democrats Amount (\$) Payee address; City: State; Zip Code \$25.00 414 Cherry Springs Lane Suite A Reimbursement from political contributions Х intended Spring, TX 77373-8185 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Harris County Young Democrats Amount (\$) Payee address; City; State; Zip Code \$50.00 Post Office Box 131672 Reimbursement from political contributions Χ Houston, TX 77219-1672 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 05/25/2023 Hispanic Bar Association of Houston (HisBA) Payee address; City; State; Zip Code Amount (\$) \$50.00 Post Office Box 3611 Reimbursement from Χ political contributions intended Houston, TX 77253-3611 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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		Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Credit Card Fayinent	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule G:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
	Sch: 16/26 Rpt: 73/83	Spain Jr., Charles A. (The Honorable)	00065741	
4	Date	5 Payee name		
	01/16/2023	Houston Black American Democrats (H-BAD)		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$250.00	4806 Edfield Street		
	Reimbursement from political contributions intended	Houston, TX 77033-3508		
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	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense	
	EXPENDITURE	Candidate/Officeholder/Political Committee Membership	_	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held	
	Date	Payee name		
	03/05/2023	Houston GLBT Political Caucus		
	Amount (\$)	Payee address; City; State; Zip Code		
\$250.00 Post Office Box 66664				
		1 OSt Office Box 00004		
	X Reimbursement from political contributions intended	Houston, TX 77266-6664		
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense	
	LXI LINDITORL	Candidate/Officeholder/Political Committee Gala		
	Complete ONLY if direct	Candidate/Officeholder name Office sough	Office held	
	expenditure to benefit C/OH			
	C/OH			
	Date	Payee name		
	01/15/2023	Houston Lawyers Association, Inc. (HLA)		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$83.00	Post Office Box 300009		
	X Reimbursement from political contributions intended	Houston, TX 77230-0009		
	PURPOSE	Category (See Categories listed at the top of this schedule) Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Contributions/Donations Made By	Check if Austin, TX, officeholder living expense	
	EXI ENDITORE	Candidate/Officeholder/Political Committee Membership		
		Candidate/Officeholder name Office sough	Office held	
	expenditure to benefit C/OH			
L	ООП			

Houston Stonewall Young Democrats

City;

Payee address;

Post Office Box 61002

\$50.00

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 17/26 Rpt: 74/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name Houston Lawyers Association, Inc. (HLA) 03/30/2023 Amount (\$) Payee address; State; Zip Code City; Post Office Box 300009 \$100.00 Reimbursement from political contributions intended Х Houston, TX 77230-0009 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Gala Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name

Reimbursement from political contributions intended	Houston, TX 77208-1002	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/16/2023	Payee name Humble Area Democrats	
Amount (\$) \$10.00	Payee address; City; State; Zip Co Post Office Box 3863	ode
Reimbursement from political contributions intended	Humble, TX 77347-3863	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	Description Check if travel outside of Texas. Complete Schedule T Check if Austin, TX, officeholder living expense Membership
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

State; Zip Code

01/16/2023

Amount (\$)

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/26 Rpt: 75/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 04/04/2023 Hypermart Payee address; Amount (\$) City; State; Zip Code \$206.83 10 Corporate Drive Suite 300 Reimbursement from political contributions Х intended Burlington, MA 01803-4200 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/07/2023 Hypermart Amount (\$) Payee address; City; State; Zip Code \$31.91 10 Corporate Drive Suite 300 Reimbursement from political contributions Χ Burlington, MA 01803-4200 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Advertising Expense **EXPENDITURE** Website Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/08/2023 LGBTQ+ Victory Fund Payee address; City; State; Zip Code Amount (\$) \$275.00 1225 I Street Northwest Suite 525 Reimbursement from political contributions intended Washington, DC 20005-6005 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Gala Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit

C/OH

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 19/26 Rpt: 76/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 03/05/2023 LGBTQ+ Victory Fund Amount (\$) Payee address; City; State; Zip Code \$500.00 1225 I Street Northwest Suite 525 Reimbursement from political contributions intended Washington, DC 20005-6005 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Labor Council for Latin American Advancement (LCLAA) Amount (\$) Payee address; City; State; Zip Code \$10.00 815 Black Lives Matter Plaza Northwest Reimbursement from political contributions Χ Washington, DC 20006-4101 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Mexican-American Bar Association of Houston (MABAH) Payee address: City; State; Zip Code Amount (\$) \$75.00 Post Office Box 303 Reimbursement from Χ political contributions intended Houston, TX 77001-0303 **PURPOSE** Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Description

OF

EXPENDITURE

Complete ONLY if direct

expenditure to benefit

C/OH

Membership

Office sought

Contributions/Donations Made By

Candidate/Officeholder name

Candidate/Officeholder/Political Committee

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) 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	I Committee L	Gift/Awards/Memorials Expense Legal Services The Instruction Guide explair		Wages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule G:	2 FILER NAME				72	Filer ID (Ethics Commission Filers)	_
_	Sch: 20/26 Rpt: 77/83		narles A. (The Honorable	<u>e</u>)			00065741	
4	Date	5 Payee name						_
	01/16/2023		rea Democrats Club					
_								
6	Amount (\$)	7 Payee addres	•	te; Zip C	ode			
	\$25.00	Post Office E	30x 310061					
	Reimbursement from political contributions intended	Houston, TX	77231-0061					
8	PURPOSE	(a) Category (See	e Categories listed at the top of this s	schedule)	(b) Description	Ch	heck if travel outside of Texas. Complete Schedule	Т.
	OF	Contributions	s/Donations Made By			Ch	heck if Austin, TX, officeholder living expense	
	EXPENDITURE	Candidate/O	fficeholder/Political Com	mittee	Membership			
9	expenditure to benefit	Candidate/Officeh	older name		Office sought		Office held	
	C/OH							
	Date	Payee name						
	02/27/2023	National LGI	BTQ+ Bar Association					
	Amount (\$)	Payee addres	s; City; Star	te; Zip C	nde			_
	\$100.00	,	Island Avenue Northwe	•	ouc			
		1701 Kiloue	Island Avenue Northwes	ol .				
	X Reimbursement from political contributions intended	Washington,	DC 20036-3001					
	PURPOSE	Category (See	e Categories listed at the top of this s	schedule)	Description	Ch	heck if travel outside of Texas. Complete Schedule	Т.
	OF EXPENDITURE	Contributions	s/Donations Made By			Cr	heck if Austin, TX, officeholder living expense	
	LAFENDITORE	Candidate/O	fficeholder/Political Com	mittee	Membership			
	Complete ONLY if direct	Candidate/Officeh	older name		Office sought		Office held	_
	expenditure to benefit				3			
	C/OH							
	Date	Payee name						=
	06/18/2023	,	ria Democratic Club					
				ta: 7:a C				_
	Amount (\$)	Payee addres		te; Zip C	oae			
	\$25.00	55 Pin Oak (Jourt					
	Reimbursement from political contributions							
	X political contributions intended	Lake Jackso	n, TX 77566-5928					
	PURPOSE	Category (See	e Categories listed at the top of this s	schedule)	Description	CI	heck if travel outside of Texas. Complete Schedule	T.
	OF	Contributions	s/Donations Made By			Cr	heck if Austin, TX, officeholder living expense	
	EXPENDITURE		fficeholder/Political Com	mittee	Membership			
					'			
	Complete ONLY if direct	Candidate/Officeh	older name		Office sought		Office held	_
	expenditure to benefit	Carididate/Officeth	oluci Hailic		Office Sought		Office Held	
	C/OH							
								_

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 21/26 Rpt: 78/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 01/16/2023 Oak Forest Area Democrats Amount (\$) Payee address; City: State; Zip Code \$10.00 6111 West 43rd Street Reimbursement from political contributions Х intended Houston, TX 77092-5014 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/23/2023 Phoenicia Specialty Foods Amount (\$) Payee address; City; State; Zip Code \$137.60 1001 Austin Street Reimbursement from political contributions Χ Houston, TX 77010-3005 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Food for fundraiser Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 06/29/2023 Phoenicia Specialty Foods Payee address; State; Zip Code Amount (\$) City; \$8.38 1001 Austin Street Reimbursement from Χ political contributions intended Houston, TX 77010-3005 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense **Event Expense EXPENDITURE** Food Complete ONLY if direct Candidate/Officeholder name Office sought Office held

expenditure to benefit

C/OH

SCHEDULE **G**

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ov Polling Ex Printing E Salaries/V	xpense 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:	2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 22/26 Rpt: 79/83		Spain Jr., Charles A. (The Honorable)			00065741
4	Date	5	Payee name			
	06/19/2023		Raise the Money, Inc.			
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode	
	\$25.00		Post Office Box 26466			
	Reimbursement from political contributions intended		Little Rock, AR 72221-6466			
8	PURPOSE	(a)	Category (See Categories listed at the top of this sched	dule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Accounting/Banking			Check if Austin, TX, officeholder living expense
	EXI ENDITORE				Fundraising platfo	orm
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought	Office held
	Date		Payee name			
	01/16/2023		Rice Young Democrats			
	Amount (\$)		Payee address; City; State;	Zip Co	ode	
	\$25.00		Post Office Box 1892			
	Reimbursement from political contributions intended		Houston, TX 77251-1892			
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commit	ttee	Membership	Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought	Office held
	Date	Г	Payee name			
	01/16/2023		River Oaks Area Democratic Women (R	ROADw	vomen)	
	Amount (\$)			Zip Co	ode	
	\$50.00		13527 North Tracewood Bend			
	Reimbursement from political contributions intended		Houston, TX 77077-1536			
	PURPOSE		Category (See Categories listed at the top of this sched	dule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commit	ttee	Membership	Check if Austin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OH	Cai	ndidate/Officeholder name		Office sought	Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule G: FILER NAME Filer ID (Ethics Commission Filers) Sch: 23/26 Rpt: 80/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 05/03/2023 South Asian Bar Association (SABA) Amount (\$) Payee address; City; State; Zip Code \$100.00 1221 McKinney Street **Suite 2860** Reimbursement from political contributions Х intended Houston, TX 77010-1078 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Gala Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/13/2023 South Brazoria County Democrats Amount (\$) Payee address; City; State; Zip Code \$100.00 55 Pin Oak Court Reimbursement from political contributions Χ Lake Jackson, TX 77566-5928 intended **PURPOSE** Category (See Categories listed at the top of this schedule) Description Check if travel outside of Texas. Complete Schedule T. OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 01/16/2023 Southwest Democrats Payee address; State; Zip Code Amount (\$) City; \$20.00 Post Office Box 2053 Reimbursement from Χ political contributions intended Bellaire, TX 77402-2053 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE G

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

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

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries The Instruction Guide explains how to describe the services of the servi	s/Wages/Contract Labor complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule G:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 24/26 Rpt: 81/83	Spain Jr., Charles A. (The Honorable)		00065741
4	Date	5 Payee name		
l	06/24/2023	Spec's		
6	Amount (\$)	7 Payee address; City; State; Zip C	Code	
l	\$132.41	2410 Smith Street		
l	Reimbursement from			
	x political contributions intended	Houston, TX 77006-2316		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.
l	OF EXPENDITURE	Event Expense		Check if Austin, TX, officeholder living expense
			Beverages	
9	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
F	Date	Payee name		
	01/16/2023	Spring Branch Democrats		
Н	Amount (\$)	Payee address; City; State; Zip C	Code	
	\$20.00	Post Office 550161		
	Reimbursement from			
	X political contributions intended	Houston, TX 77255-0161		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By	L	Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee	Membership	
┡	Complete ONLY if direct	Candidata/Officahaldar nama	Office cought	Office hold
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
Г	Date	Payee name		
	01/16/2023	Spring Democratic Club		
	Amount (\$)	Payee address; City; State; Zip C	Code	
	\$25.00	618 Spring Cypress Road		
	Reimbursement from political contributions			
	x political contributions intended	Spring, TX 77373-2526		
	PURPOSE	Category (See Categories listed at the top of this schedule)	Description	Check if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Contributions/Donations Made By		Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee	Membership	
	Complete ONLY if direct expenditure to benefit	Candidate/Officeholder name	Office sought	Office held
	C/OH			
Г				

SCHEDULE G

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		Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule G: Sch: 25/26 Rpt: 82/83	2 FILER NAME Spain Jr., Charles A. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00065741
4	Date	5 Payee name	
	01/16/2023	Texas Democratic Party	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.00	Post Office Box 15707	
	Reimbursement from political contributions intended	Austin, TX 78761-5707	
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	Contributions/Donations Made By Candidate/Officeholder/Political Committee Membership	Check if Austin, TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sough	t Office held
	Date	Payee name	
	01/16/2023	Texas Democratic Women of Harris County Metro Area	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	4619 Lyons Avenue	
	X Reimbursement from political contributions	Suite A	
	intended	Houston, TX 77020-4304	
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Description Cantributions (Passations Made Ru	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Membership	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sough	t Office held
	Date	Payee name	
	01/16/2023	West Houston Democrats	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.00	13114 Waldemere Drive	
	Reimbursement from political contributions intended	Houston, TX 77077-5513	
	PURPOSE OF	Category (See Categories listed at the top of this schedule) Description	
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Membership	Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Membership	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sough	t Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS SCHEDULE G **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. FILER NAME Filer ID Total pages Schedule G: (Ethics Commission Filers) Sch: 26/26 Rpt: 83/83 Spain Jr., Charles A. (The Honorable) 00065741 Date Payee name 01/16/2023 West University Area Democratic Club 6 Amount (\$) Payee address; State; Zip Code City; \$25.00 4118 Milton Street Reimbursement from political contributions intended Х Houston, TX 77005-2738 **PURPOSE** (b) Description Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) OF Check if Austin, TX, officeholder living expense Contributions/Donations Made By **EXPENDITURE** Candidate/Officeholder/Political Committee Membership Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH