CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to comp	olete this form.	1 Filer ID (Ethics Commi 00067972		2 Total pages filed: 90	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE	ONLY
OFFICEHOLDER NAME	The Honorable	Ann			Date Received	
					ELECTRONICALLY	FII FD
	AUGUALAN 45			OUEEN	07/17/2023	
	NICKNAME	LAST Johnson		SUFFIX	01/11/2023	
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; AP	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered or Date Po	ostmarked
MAILING	P.O. Box 56386				Receipt # Amo	unt
ADDRESS					Receipt #	uiii
Change of Address	Houston, TX 77256				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME	Mr.	Sheldon				
	NICKNAME	LAST		SUFFIX		
		Wadler				
6 CAMPAIGN	STREET ADDRESS (NO PO	O BOX PLEASE);	AP.	T / SUITE #; CITY	; STATE;	ZIP CODE
TREASURER ADDRESS	10710 S. Sam Houston F	² kwy. W #280				
(Residence or Business)						
(,	Houston, TX 77031					
7 CAMPAIGN	AREA CODE PHO	NE NUMBER E	EXTENSION			
TREASURER	(713) 771-3131	'NE NOWBER E	EXTENSION			
PHONE	(713) 771-3131					
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after campaign	
					appointment (officeholde	
	X July 15	8th day before 6	ection	Exceeded modified reporting limit	Final Report (Attach C/O	PH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023		IROUGH	Month Day 06/30/202		
	01/01/2020	•••		00/30/20/		
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	XPI	rimary	Runoff	Other	
	03/05/2024		eneral	Special		
			Cilciai	Special		
11 OFFICE	OFFICE LIFL D (if any)			12 OFFICE COLICUS	T (if known)	
11 OFFICE	OFFICE HELD (if any) State Representative Dis	strict 134		12 OFFICE SOUGH	tative District 134	
	State Representative Bio	7.110t 104		Ciate Represent	tative District 104	
		GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 90

13 C / OH NAME	Johnson, Ann (The H	onorable)	14 Filer ID (00067972	(Ethics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this informatio	the candidate's or office	eholder's knowledge or		
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME				
⊔ °	GENERAL					
		COMMITTEE ADDRESS				
	SPECIFIC					
		COMMITTEE CAMPAIGN TREASURER NAME				
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS			
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00				
	\$ 133,849.50					
EXPENDITURE TOTALS		\$ 0.00				
	4. TOTAL POLITICAL EXPENDITURES					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 302,294.44		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 0.00		
17 AFFIDAVIT		I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.				
		The Ho	norable Ann Johnson			
		Signature o	f Candidate or Officehol	der		
AFFIX NO	TARY STAMP / SEAL ABO	OVE				
Sworn to and subs	cribed before me, by the s	aid	, this the	day		
of	, 20, to ce	rtify which, witness my hand and seal of office.				
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath		

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

					3 of 90
	LER NAN		19 Filer ID	(Eth	nics Commission Filers)
Jo	hnson,	Ann (The Honorable)	00067972		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	133,585.50
2.	Х	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	264.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		\$			
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	92,939.73	
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.	X	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	2,362.45
10	. 🔲	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
				•	

	MONEI	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to comp	olete this form	n.	1	Total pages Schedule A1: Sch: 1/45 Rpt: 4/90	
2	FILER NAME	(The Herendele)			3	Filer ID (Ethics Commission	on Filers)
		n (The Honorable)				00067972	
4	Date 06/30/2023	 Full name of contributor ut-of-si out-of-si Adams, Will Contributor address; City; State; Zip Contributor city city	tate PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
Ω	Principal occu	Katy, TX 77494 pation / Job title (See Instructions)	la l	Employer (See Instructions			
0	Trial Lawyer	oation / Job title (See instructions)]	Self Employed	,		
	Date 06/30/2023	Adler, Jim Contributor address; City; State; Zip Co	tate PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Houston, TX 77019 pation / Job title (See Instructions)		Employer (See Instructions			
	Attorney	oalion / 300 tille (See maildelions)		Jim S. Adler PC	,		
	Date 06/29/2023	Full name of contributor out-of-si Adler, Jim Contributor address; City; State; Zip Co	tate PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77019					
	·	pation / Job title (See Instructions)		Employer (See Instructions)		
	Attorney			Jim S. Adler PC			
	Date 06/29/2023	Full name of contributor out-of-si Alberg, Andrea Contributor address; City; State; Zip Co	tate PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		
	Date 06/30/2023	Full name of contributor out-of-si Alsup, Maureen Contributor address; City; State; Zip Co	tate PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDU	LE A1
	The Instruc	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 2/45 Rpt: 5/90	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Johnson, An	n (The Honorable)				00067972	
4	Date 06/22/2023	Full name of contributor Arnold, Kurt Contributor address; City; Si	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10,000.00
_	Drive in all and	Houston, TX 77007		Facility (October 1)			
8	Attorney	pation / Job title (See Instructions	9	Employer (See Instructions Arnold & Itkin LLP	5)		
	Date 06/20/2023	Full name of contributor Atlas, Scott Contributor address; City; Si Houston, TX 77098	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	(3)	Employer (See Instructions	<u> </u> 		
	Legal Consu		,	Self Employed	-,		
	Date 06/19/2023	Full name of contributor Aubin, Katherine Contributor address; City; Si	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
		Houston, TX 77077					
	•	pation / Job title (See Instructions	(3)	Employer (See Instructions	s)		
	Not Employe			Not Employed	_		
	Date 06/27/2023	Full name of contributor Aziz, Muhammad Contributor address; City; Si Houston, TX 77002	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions Abraham Watkins Nicho		Agosto Aziz & Stogner	
	Date 06/28/2023	Full name of contributor Bankston, Jim Contributor address; City; Si Manvel, TX 77578	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/45 Rpt: 6/90	
2	FILER NAME	· (The Heaven He)			3	Filer ID (Ethics Commission	n Filers)
		n (The Honorable)			L	00067972	
4	Date 06/29/2023	5 Full name of contributor Barron, Kelly6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$25.00
		Houston, TX 77095					
8	Principal occu	pation / Job title (See Instruction:	5)	9 Employer (See Instructions	5)		
	Juvenile Pro	bation Officer		Harris County			
	Date 06/28/2023	Full name of contributor Bellaire Braeswood Demo Contributor address; City; S				Amount of Contribution (\$)	\$200.00
		Bellaire, TX 77401					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	s)		
	Date 06/28/2023	Full name of contributor Bennett, Robert Contributor address; City; S	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$25.00
		Houston, TX 77030					
	Principal occu	I pation / Job title (See Instructions	s)	Employer (See Instructions	<u>L</u> S)		
	Attorney			Bennett Law Firm			
	Date 06/26/2023	Full name of contributor Bercutt, Pamela Contributor address; City; S Bellaire, TX 77401	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$250.00
	Principal occu Owner	pation / Job title (See Instructions	5)	Employer (See Instructions Bercutt Physical Therap		PLLC	
	Date	Full name of contributor	out-of-state PAC (ID#:	,	Ť	Amount of Contribution (\$)	
	06/24/2023	Berg, Thomas Contributor address; City; S Houston, TX 77007				y another of contribution (e)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions Self Employed	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 4/45 Rpt: 7/90	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		n (The Honorable)	_			00067972	
4	Date 06/30/2023	5 Full name of contributor Engres, Rita6 Contributor address; City; Star	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$250.00
		Houston, TX 77006					
8	Principal occu Not Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions Not Employed)		
	Date 06/29/2023	Full name of contributor Bernstein, Karen Contributor address; City; Star Houston, TX 77030	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Engineer			NASA			
	Date 06/30/2023	Full name of contributor [Bernstein, Patricia Contributor address; City; Star	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$100.00
		Bellaire, TX 77401					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Publicist			Bernstein and Associate	s		
	Date 06/28/2023	Full name of contributor Blackridge Contributor address; City; Star Austin, TX 78701	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 06/29/2023	Full name of contributor Block, Nelson Contributor address; City; Star Houston, TX 77096	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 5/45 Rpt: 8/90	
2	FILER NAME	ın (The Honorable)		3	Filer ID (Ethics Commission 00067972	on Filers)
4	Date 06/28/2023	Full name of contributor		7	Amount of Contribution (\$)	\$500.00
		Houston, TX 77019				
8	Principal occu Not Employe	pation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	s)		
	Date 06/19/2023	Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$250.00
	Principal occu	Pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Not Employe	ed	Not Employed			
	Date 06/26/2023	Full name of contributor out-of-state PAC (II Bond, Ingrid Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$50.00
		Houston, TX 77019				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	s)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (II Boyd, Butch Contributor address; City; State; Zip Code Houston, TX 77098	D#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	s)		
	Date	Full name of contributor out-of-state PAC (II		Τ	Amount of Contribution (\$)	
	06/28/2023	Boydstun, Chree			,,	\$1,000.00
	Principal occu Fundraiser	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Fundraiser		Legacy			

	MONEI	ARY POLITICAL CON	ITRIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to c	omplete this form	n.	1	Total pages Schedule A1: Sch: 6/45 Rpt: 9/90	
2	FILER NAME	n (The Honorable)			3	Filer ID (Ethics Commission 00067972	n Filers)
4	Date		et of ototo DAC (ID#)	1	7	Amount of Contribution (\$)	
4	06/26/2023	Brogden, William 6 Contributor address; City; State; Zi	ut-of-state PAC (ID#: ip Code	,	,	Amount of Continuution (4)	\$10.00
_	Diania da acces	Leander, TX 78641	lo.	English (Control to the Control			
8	Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired)		
	Date 06/26/2023	Brown, Joseph Contributor address; City; State; Zi	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Schertz, TX 78109					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		
	Date 06/25/2023	Full name of contributor on Dryan, Sandy Contributor address; City; State; Zi	ut-of-state PAC (ID#: ip Code)		Amount of Contribution (\$)	\$250.00
		Houston, TX 77005					
	Principal occu Self Employe	pation / Job title (See Instructions)		Employer (See Instructions Realtor)		
	Date 06/21/2023		ut-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)		
	Date 06/30/2023	Full name of contributor ou Buck, Larry Contributor address; City; State; Zi Houston, TX 77024	ut-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		pation / Job title (See Instructions)		Employer (See Instructions			
	Risk Manage	ement Consultant		Larry W. Buck & Associa	ate	S	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/45 Rpt: 10/90	
2	FILER NAME	(The Herene Ha)		3	Filer ID (Ethics Commission	on Filers)
		ın (The Honorable)		L	00067972	
4	Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID# Bunn, Benjamin		7	Amount of Contribution (\$)	\$250.00
		6 Contributor address; City; State; Zip Code				
		San Diego, CA 92101				
8	Principal occu Lawyer	pation / Job title (See Instructions)	9 Employer (See Instructions Bunn Law Group	s)		
	Date	Full name of contributor ut-of-state PAC (ID#	t:)		Amount of Contribution (\$)	
	06/28/2023	Burge, Dorothy				\$100.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77005		Ļ		
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ea	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	<i>‡</i> :)		Amount of Contribution (\$)	
	06/24/2023	Burks, Dr. Robin]		\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	?) 		
	Clinical Psyc		Self Employed	٠,		
				Т	Amount of Contribution (\$)	
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID# Bylo Chacon, Jessica	<i>t</i> :)		Amount of Contribution (\$)	\$1.00
	00/19/2023			ł		Φ1.00
		Contributor address; City; State; Zip Code				
		Berkeley, CA 94704				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	<u> </u>	Т	Amount of Contribution (\$)	
	06/30/2023	Callahan, Michael			(,)	\$1,000.00
		Contributor address; City; State; Zip Code		ł		•
		Bellaire, TX 77401				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Michael Callahan PC			
_						

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 8/45 Rpt: 11/90	
2	FILER NAME	n (The Henerable)			3	Filer ID (Ethics Commission	on Filers)
_		n (The Honorable)			L	00067972	
4	Date 06/30/2023	5 Full name of contributorCalvert, Rogene Gee6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
•	Dringing Local	Houston, TX 77025 pation / Job title (See Instructions	s) lo	Employer (See Instructions			
ō	Consultant	pation / Job title (See instructions	5)	Outreach Strategists	s)		
	Date 06/29/2023	Full name of contributor Canada, Meredith Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Galveston, TX 77554			<u> </u>		
		pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Not Employe	ea 		Not Employed			
	Date 06/30/2023	Full name of contributor Cardenas, Alberto Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)		Amount of Contribution (\$)	\$500.00
		Houston, TX 77002					
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Chairman			BC Global LP			
	Date 06/28/2023	Full name of contributor Carter, Michael Contributor address; City; S Houston, TX 77098	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Funeral Dire	pation / Job title (See Instructions ctor	5)	Employer (See Instructions Bradshaw-Carter	s)		
	Date 06/23/2023	Full name of contributor Carter, Michael Contributor address; City; S Houston, TX 77098	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu Funeral Dire	pation / Job title (See Instructions ctor	5)	Employer (See Instructions Bradshaw-Carter	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 9/45 Rpt: 12/90	
2	FILER NAME	n (The Henerable)		3	Filer ID (Ethics Commission	n Filers)
		n (The Honorable)			00067972	
4	Date 06/28/2023	Full name of contributor		7	Amount of Contribution (\$)	\$250.00
		6 Contributor address; City; State; Zip Code				
_	Delegale at a second	Houston, TX 77027	6 Faralana (O. a. la atmostica a	<u></u>		
8	Educator	pation / Job title (See Instructions)	Employer (See Instructions A+UP	5)		
	Date	Full name of contributor ut-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Chamberlain, John				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		Not Employed	,		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/28/2023	Chandler, Christin			· ,	\$500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	President		Stratos Title			
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/28/2023	Chandler, Troy				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Attorney		Chandler McNulty LLP			
	Date	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/19/2023	Clark, Janet				\$500.00
		Contributor address; City; State; Zip Code		1		
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
			L			

	MONEI	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 10/45 Rpt: 13/90			
2	FILER NAME Johnson, An	n (The Honorable)			3	Filer ID (Ethics Commission 00067972	on Filers)		
4	Date 06/26/2023	5 Full name of contributor Clark, Janet6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$500.00		
8	Principal occu Not Employe	Houston, TX 77005 pation / Job title (See Instructionsed) [Employer (See Instructions Not Employed	5)				
	Date 06/28/2023	Full name of contributor Clark, Patsy Contributor address; City; St Spring, TX 77379	out-of-state PAC (ID#: ate; Zip Code		•	Amount of Contribution (\$)	\$100.00		
	Principal occu Teacher	pation / Job title (See Instructions)	Employer (See Instructions Klein ISD	<u> </u> s)				
	Date 06/28/2023	Full name of contributor Clement, Emily Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$50.00		
	•	Bellaire, TX 77401 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)				
	Not Employe Date 06/28/2023	Full name of contributor Cohn, Julie Contributor address; City; St Houston, TX 77030	out-of-state PAC (ID#:ate; Zip Code	Not Employed		Amount of Contribution (\$)	\$1,000.00		
	Principal occu Historian	pation / Job title (See Instructions)	Employer (See Instructions Keylogic	5)				
	Date 06/27/2023	Full name of contributor Conner, Matthew Contributor address; City; St Cypress, TX 77433	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$250.00		
	Principal occu Managing Pr	pation / Job title (See Instructions rincipal)	Employer (See Instructions Arete Public Affairs	<u>.</u> S)				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	form.		s Schedule A1: 5 Rpt: 14/90	
2	FILER NAME				Ethics Commissio	n Filers)
		ın (The Honorable)		00067972		
4	Date 06/28/2023	5 Full name of contributor out-of-state PAC (ID#: Cook, Mary		7 Amount of	Contribution (\$)	\$100.00
		6 Contributor address; City; State; Zip Code Houston, TX 77005				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
_	Attorney	pation 7 sob tale (See instructions)	Self Employed			
	Date	Full name of contributor ut-of-state PAC (ID#:	:)	Amount of	Contribution (\$)	
	06/28/2023	Corley, Delane				\$175.00
		Contributor address; City; State; Zip Code				
		Waller, TX 77484				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Director of Finance & Administration		Family Ties Family Res		S	
Date		Full name of contributor out-of-state PAC (ID#:	.)	Amount of	Contribution (\$)	
	06/28/2023	Cotter, John				\$25.00
		Contributor address; City; State; Zip Code				
		, ,				
		Kingwood, TX 77345				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Pilot		United Airlines			
	Date	Full name of contributor ut-of-state PAC (ID#:	:)	Amount of	Contribution (\$)	
	06/29/2023	Crowley, Brian				\$5.00
		Contributor address; City; State; Zip Code				
		Chicago, IL 60613				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 		
	Designer	,	Allstate	,		
	Date	Full name of contributor uut-of-state PAC (ID#:	:)	Amount of	Contribution (\$)	
	06/27/2023	Cryer, Linda			(.,	\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77006				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Self Employed			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1		
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 12/45 Rpt: 15/90			
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)		
	Johnson, An	n (The Honorable)			00067972			
4	Date 06/28/2023	5 Full name of contributor out-of-state PAC (ID# Cuellar, Sonya		7	Amount of Contribution (\$)	\$100.00		
		6 Contributor address; City; State; Zip Code						
		Houston, TX 77007		<u> </u>				
8	Artist	pation / Job title (See Instructions)	9 Employer (See Instructions Self Employed	s)				
	Date	Full name of contributor ut-of-state PAC (ID#	t:)		Amount of Contribution (\$)			
	06/19/2023	Cunningham, Sharon				\$100.00		
		Contributor address; City; State; Zip Code						
		Houston, TX 77098						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
Not Employed		ed	Not Employed					
	Date	Full name of contributor out-of-state PAC (ID#	f:)		Amount of Contribution (\$)			
	06/28/2023	Danburg, Debra				\$100.00		
		Contributor address; City; State; Zip Code						
	Dringing Lagou	Austin, TX 78704	Franksian (Cas Instructions	<u>-,</u>				
	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	S)				
	Date	Full name of contributor ut-of-state PAC (ID#	t:)		Amount of Contribution (\$)			
	06/29/2023					\$250.00		
		Contributor address; City; State; Zip Code						
		Houston, TX 77098						
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Not Employe	ed	Not Employed					
	Date	Full name of contributor ut-of-state PAC (ID#	t:)		Amount of Contribution (\$)			
	06/30/2023	Darmer, Karen				\$25.00		
		Contributor address; City; State; Zip Code						
		Katy, TX 77494						
		pation / Job title (See Instructions)	Employer (See Instructions	s)				
	Not Employe	ed	Not Employed					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 13/45 Rpt: 16/90	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Johnson, Ann (The Honorable)				00067972	
4	Date 06/19/2023	5 Full name of contributor out-of-state PAC (ID# Dauerty, Barbara		7	Amount of Contribution (\$)	\$25.00
		6 Contributor address; City; State; Zip Code Universal City, TX 78148				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>L</u>		
	Physician As		Nagel Community Clinic			
	Date	Full name of contributor out-of-state PAC (ID#		Π	Amount of Contribution (\$)	
	06/30/2023	Day, Jonathan	·		randant of Contribution (\$)	\$500.00
	00/00/2020					4000.00
		Continuator address, Only, State, 219 Sode				
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employed		Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#	::)		Amount of Contribution (\$)	
	06/27/2023	Diamondstone, Kenneth				\$25.00
		Contributor address; City; State; Zip Code				
		Brooklyn, NY 11217	1			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#	:)	Г	Amount of Contribution (\$)	
	06/30/2023	Dumke, Matt				\$2.50
		Contributor address; City; State; Zip Code				
		Portland, OR 97232	-			
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor ut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	06/30/2023	Easter, Cathy				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		H TV 77005				
	Dalacie el	Houston, TX 77005	Franksissi (Ossala i vi	<u></u>		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Health Care	EXECUTIVE	Houston Methodist			

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/45 Rpt: 17/90			
2	FILER NAME Johnson, An	n (The Honorable)		3	Filer ID (Ethics Commission 00067972	on Filers)		
4	Date 06/30/2023	5 Full name of contributor out-of-state PAC (ID#:_ Eichenbaum, Marc 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$100.00		
_	Deinsinal	Houston, TX 77008						
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions)City of Houston)				
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Emal, Matthew Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00		
	Principal occu	Houston, TX 77057 pation / Job title (See Instructions)	Employer (See Instructions)				
	CAO		Langrand					
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#:_ Estabrook, Helen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00		
		Houston, TX 77019						
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired)				
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Estefan, Paula Contributor address; City; State; Zip Code Conroe, TX 77301			Amount of Contribution (\$)	\$1,000.00		
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Elliott & Little)				
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Fenoglio, John Contributor address; City; State; Zip Code Houston, TX 77005			Amount of Contribution (\$)	\$500.00		
	Principal occu Real Estate	pation / Job title (See Instructions)	Employer (See Instructions CBRE Inc)				

Eagle, ID 83616 8 Principal occupation / Job title (See Instructions) Not Employed Date 06/23/2023 Forney, Jan Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Not Employed Date 06/19/2023 Full name of contributor Houston, TX 77006 Principal occupation / Job title (See Instructions) Not Employed Amount of Contribution (\$) \$ Employer (See Instructions) Not Employed Amount of Contribution (\$) \$ \$ Contributor address; City; State; Zip Code Frates, Ralph Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed Amount of Contribution (\$) \$ \$ \$ \$ Employer (See Instructions) Not Employed Amount of Contribution (\$) \$ \$ \$ \$ \$ \$ \$ Principal occupation / Job title (See Instructions) Not Employed Rot Employed	
Johnson, Ann (The Honorable) 4 Date	
4 Date 06/26/2023 Fimbres, Elizabeth S Full name of contributor out-of-state PAC (ID#:	\$25.00
Second Se	\$25.00
Eagle, ID 83616 8 Principal occupation / Job title (See Instructions) Not Employed Date	
8 Principal occupation / Job title (See Instructions) Not Employed Date O6/23/2023 Forney, Jan Contributor address; City; State; Zip Code Principal occupation / Job title (See Instructions) Not Employed Amount of Contribution (\$) \$ Employer (See Instructions) Not Employed \$ Amount of Contribution (\$) Employer (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Amount of Contribution (\$) Employer (See Instructions) Not Employed Amount of Contribution (\$) Frates, Ralph Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed	
Not Employed Date Full name of contributor out-of-state PAC (ID#:	
Second	
Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Not Employed Date Date O6/19/2023 Frates, Ralph Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employer (See Instructions) S2: Employer (See Instructions) S2: Employer (See Instructions) Not Employed	
Contributor address; City; State; Zip Code Houston, TX 77006 Principal occupation / Job title (See Instructions) Not Employed Date 06/19/2023 Frates, Ralph Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Amount of Contribution (\$) \$2: Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed	\$25.00
Principal occupation / Job title (See Instructions) Not Employed Date Date Full name of contributor O6/19/2023 Frates, Ralph Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Frates, Ralph S2! Contributor address; City; State; Zip Code Houston, TX 77005 Employer (See Instructions) Not Employed	
Principal occupation / Job title (See Instructions) Not Employed Date Date Full name of contributor O6/19/2023 Frates, Ralph Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Frates, Ralph S2! Contributor address; City; State; Zip Code Houston, TX 77005 Employer (See Instructions) Not Employed	
Not Employed Date Full name of contributor out-of-state PAC (ID#:	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
06/19/2023 Frates, Ralph Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed	
Contributor address; City; State; Zip Code Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed	
Houston, TX 77005 Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed	\$250.00
Principal occupation / Job title (See Instructions) Not Employed Employer (See Instructions) Not Employed	
Not Employed Not Employed	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
	\$25.00
Contributor address; City; State; Zip Code	
Houston, TX 77096	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Teacher Houston ISD	
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
	\$250.00
Contributor address; City; State; Zip Code	
Houston, TX 77005	
Principal occupation / Job title (See Instructions) Employer (See Instructions)	
Not Employed Not Employed	
L	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/45 Rpt: 19/90	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Johnson, An	n (The Honorable)			00067972	
4	Date 06/24/2023	5 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
		6 Contributor address; City; State; Zip Code				
_	Dringing Loggy	Houston, TX 77005	Employer (Co. Instructions	<u>, </u>		
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	ΦΩ ΕΩΩ ΩΩ
	06/27/2023					\$2,500.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77098				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		The Gallagher Law Firm	1		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	06/25/2023	Gederberg, Thomas				\$250.00
		Contributor address; City; State; Zip Code				
	Principal occu	Houston, TX 77025 pation / Job title (See Instructions)	Employer (See Instructions	·/ 		
	Engineer	pation / Job title (See Instructions)	Boeing	»)		
	Date	Full name of contributor)		Amount of Contribution (\$)	
	06/19/2023					\$25.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77025				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Engineer		Boeing			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/30/2023	Genova, Justine				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77007				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			

	MONEI	ARY POLITICAL CO	ONTRIBUTION	NS		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 17/45 Rpt: 20/90	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
	Johnson, An	n (The Honorable)				00067972	
4	Date 06/27/2023	5 Full name of contributor George, Karen6 Contributor address; City; Stat	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
		Houston, TX 77005					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
•	Financial Co			Ralph S. O'Connor & As		ciates	
	Date	Full name of contributor	T out of otata BAC (ID#)	,	Т		
	06/21/2023	Gilliam, Lance Contributor address; City; Stat	out-of-state PAC (ID#:e; Zip Code)	•	Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77019					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Real Estate			Waterman Steele Real I	Esta	ate Advisors	
	Date 06/28/2023	Full name of contributor Grace & McEwan Consultin Contributor address; City; Stat)		Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/30/2023	Full name of contributor Greer, Andrea Contributor address; City; Stat Houston, TX 77009	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Consultant			Andrea Greer Consultin	g		
	Date 06/19/2023	Full name of contributor Gregg, Kerry Contributor address; City; Stat Houston, TX 77003	out-of-state PAC (ID#: e; Zip Code)	•	Amount of Contribution (\$)	\$500.00
	Principal occu Marketing	pation / Job title (See Instructions)		Employer (See Instructions LAN Inc.	<u>1</u> S)		

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/45 Rpt: 21/90			
2	FILER NAME Johnson, An	nn (The Honorable)		3	Filer ID (Ethics Commission 00067972	n Filers)		
4	Date 06/26/2023	 Full name of contributor out-of-state PAC (ID#:_Griffiths, Therese Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$250.00		
8	Principal occu	Houston, TX 77005 upation / Job title (See Instructions)	9 Employer (See Instructions					
•	Not Employe		Not Employed	,				
	Date 06/24/2023	Full name of contributor out-of-state PAC (ID#:_ Griffiths, Therese Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
	Principal occu	Houston, TX 77005 upation / Job title (See Instructions)	Employer (See Instructions)				
Not Employed		ed	Not Employed					
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#:_ Guffey, Jan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00		
		Gilroy, CA 95020						
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)				
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Hale, Michelle Contributor address; City; State; Zip Code Galveston, TX 77554			Amount of Contribution (\$)	\$50.00		
	Principal occu Not Employe	ipation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)				
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Hanks, Liz Contributor address; City; State; Zip Code Houston, TX 77008			Amount of Contribution (\$)	\$500.00		
	Principal occu Not Employe	ipation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)				

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/45 Rpt: 22/90	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	Johnson, An	n (The Honorable)			00067972	
4	Date 06/25/2023	5 Full name of contributor out-of-state PAC (ID#:_ Haun, Ryan		7	Amount of Contribution (\$)	\$500.00
		6 Contributor address; City; State; Zip Code				
8	Principal occu	Pation / Job title (See Instructions)	9 Employer (See Instructions	,, 		
•	Lawyer	pation / 300 title (See Instructions)	Haun Mena PLLC	•)		
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	** ***
	06/29/2023					\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77008				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Aaron M Heckaman PLL	LC		
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	06/29/2023	Henderson, Jim				\$100.00
		Contributor address; City; State; Zip Code Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/23/2023	Hittner, George				\$250.00
		Contributor address; City; State; Zip Code		•		
		Houston, TX 77254				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		The Hittner Group PLLC			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/28/2023	Hobby, Paul				\$250.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77019				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Investor		Genesis Park			

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUL	E A1	
	The Instru	ction Guide explains how to complete thi	is form.	1	Total pages Schedule A1: Sch: 20/45 Rpt: 23/90		
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)	
	Johnson, An	n (The Honorable)		L	00067972		
4	Date 06/26/2023	5 Full name of contributor out-of-state PAC (II Horowitz, Daniel		7	Amount of Contribution (\$)	\$500.00	
		6 Contributor address; City; State; Zip Code					
_		Houston, TX 77002		Ļ			
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Daniel D. Horowitz III Po				
	Date	Full name of contributor ut-of-state PAC (II	D#:)		Amount of Contribution (\$)		
	06/28/2023					\$100.00	
		Contributor address; City; State; Zip Code					
		Houston, TX 77007					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Not Employed		Not Employed				
	Date	Full name of contributor ut-of-state PAC (II	D#:)		Amount of Contribution (\$)		
	06/19/2023	Huebel, Martha				\$25.00	
		Contributor address; City; State; Zip Code Houston, TX 77035					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Not Employe	ed	Not Employed				
	Date	Full name of contributor ut-of-state PAC (II	D#:)		Amount of Contribution (\$)		
	06/30/2023	Hunter, James				\$25.00	
		Contributor address; City; State; Zip Code		•			
		Houston, TX 77023					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Manager		Native Citizen				
	Date	Full name of contributor ut-of-state PAC (II	D#:)		Amount of Contribution (\$)		
	06/28/2023	Hunter, Nelda				\$500.00	
		Contributor address; City; State; Zip Code					
		Austin, TX 78751					
		pation / Job title (See Instructions)	Employer (See Instructions	s)			
	Budget and	Policy Consultant	HillCo Partners				

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDU	LE A1
	The Instru	ction Guide explains how	to complete this for	rm.	1	al pages Schedule A1: 1: 21/45 Rpt: 24/90	
2	FILER NAME				1	ID (Ethics Commissi	on Filers)
	Johnson, An	n (The Honorable)				67972	
4	Date 06/22/2023	5 Full name of contributorItkin, Jason6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7 Amo	ount of Contribution (\$)	\$10,000.00
		Houston, TX 77007					
8	Principal occu Attorney	pation / Job title (See Instructions		Employer (See Instructions Arnold & Itkin LLP			
	Date 06/28/2023	Full name of contributor Ivey, Todd Contributor address; City; St Houston, TX 77027	out-of-state PAC (ID#: ate; Zip Code		Amo	ount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Physician			Baylor College Of Medic			
	Date 06/29/2023	Full name of contributor Jackson, Jan Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	Amo	ount of Contribution (\$)	\$500.00
		Houston, TX 77005					
	Principal occu Registered N	pation / Job title (See Instructions Jurse		Employer (See Instructions M D Anderson Cancer C	•		
	Date 06/23/2023	Full name of contributor Jenkins, Joan Contributor address; City; St Wimberley, TX 78676	out-of-state PAC (ID#:ate; Zip Code		Amo	ount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions ed)	Employer (See Instructions Not Employed	s)		
	Date 06/27/2023	Full name of contributor Jeudy, Wil Contributor address; City; St Houston, TX 77008	out-of-state PAC (ID#:		Amo	ount of Contribution (\$)	\$250.00
	Principal occu Physician	pation / Job title (See Instructions		Employer (See Instructions Next Level Urgent Care			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/45 Rpt: 25/90	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	Johnson, An	n (The Honorable)			00067972	
4	Date 06/19/2023	 5 Full name of contributor		7	Amount of Contribution (\$)	\$25.00
		Houston, TX 77256				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>		
	Attorney		Johnson Law Firm PC			
	Date	Full name of contributor out-of-state PAC (ID#:_			Amount of Contribution (\$)	
	06/29/2023	Jurvetson, Karla				\$900.00
		Contributor address; City; State; Zip Code				
		L Alta- CA 04000				
	Dringing Loggy	Los Altos, CA 94022	Employer (Coo Instructions	_		
	Physician Physician	pation / Job title (See Instructions)	Employer (See Instructions Self Employed)		
		Full name of contributor	Cen Employed		Amount of Contribution (f)	
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ Kapoor, Poonam)		Amount of Contribution (\$)	\$250.00
	00/13/2020					Ψ200.00
		Communication addresss, Only, State, 21p code				
	Dringingless	Houston, TX 77007	Franks on (Cas Instructions	_		
	Realtor	pation / Job title (See Instructions)	Employer (See Instructions Ashoka Lion	5)		
				_	A (A)	
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Karpas, Leslie)		Amount of Contribution (\$)	\$100.00
	00/29/2023					Ψ100.00
		Contributor address, City, State, Zip Code				
		Houston, TX 77027				
	•	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	Not Employed			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	06/28/2023	Keffer Konsulting LLC				\$250.00
		Contributor address; City; State; Zip Code				
		Eastland, TX 76448				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	,			,		
			l			

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/45 Rpt: 26/90	
2	FILER NAME Johnson, An	ın (The Honorable)		3	Filer ID (Ethics Commission 00067972	on Filers)
4	Date 06/28/2023	 Full name of contributor out-of-state PAC (ID#:_Kelly Company Real Estate Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
_	Dringing	Houston, TX 77025	O Franks var (Can Instruction			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/23/2023	Full name of contributor out-of-state PAC (ID#:_ Kerr, Garland Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77005 pation / Job title (See Instructions)	Employer (See Instructions)		
	CPA	pation 7 sob title (see instructions)	Whitley Penn	,		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Kherkher, Steven Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,123.00
		Houston, TX 77098				
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Kherkher Garcia LLP)		
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Kherkher, Steven Contributor address; City; State; Zip Code Houston, TX 77098			Amount of Contribution (\$)	\$500.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Kherkher Garcia LLP)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Killian, Thomas Contributor address; City; State; Zip Code Houston, TX 77096			Amount of Contribution (\$)	\$250.00
	Principal occu Professor	pation / Job title (See Instructions)	Employer (See Instructions Rice University)		

	MONET	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 24/45 Rpt: 27/90			
2	FILER NAME Johnson, An	n (The Honorable)			3	Filer ID (Ethics Commission 00067972	on Filers)		
4	Date 06/27/2023	Kohnert, Peggie	-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00		
8	Principal occu	Houston, TX 77098 pation / Job title (See Instructions)	9	Employer (See Instructions)				
	Realtor			Self employed					
	Date 06/30/2023	Kohnert, Peggie Contributor address; City; State; Zip)		Amount of Contribution (\$)	\$1,000.00		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>				
	Realtor	pation / vob title (See instructions)		Self employed	,				
	Date 06/27/2023	Full name of contributor out- Kulish, Kevin Contributor address; City; State; Zip	-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00		
		Houston, TX 77019							
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed)				
	Date 06/28/2023	Kyle, Candace				Amount of Contribution (\$)	\$250.00		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed)				
	Date 06/30/2023	Labrador, Elena	of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00		
	Principal occu Chemist	pation / Job title (See Instructions)		Employer (See Instructions Prospec)				
			•						

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/45 Rpt: 28/90	
2	FILER NAME Johnson, An	ın (The Honorable)		3	Filer ID (Ethics Commiss 00067972	ion Filers)
4	Date 06/28/2023	5 Full name of contributor out-of-state PAC (ID#:_ Laminack, Pirtle & Martines 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$10,000.00
0	Dringing oggu	Houston, TX 77006 pation / Job title (See Instructions)	Employer (See Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/23/2023	Full name of contributor			Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77006 pation / Job title (See Instructions)	Employer (See Instructions)		
	Attorney	pation 7 oob title (oce mondetions)	Retired			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Leal, Mercedes Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Houston, TX 77006				
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Retired)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Leffler, Todd Contributor address; City; State; Zip Code Houston, TX 77019)		Amount of Contribution (\$)	\$500.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Todd A. Leffler, Attorney		Law	
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Lester, Jim Contributor address; City; State; Zip Code Bogata, TX 75417)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed)		

	MONEI	ARY POLITICAL C	SCHEDULE A1				
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 26/45 Rpt: 29/90	
2	FILER NAME	n (The Honorable)			3	Filer ID (Ethics Commission 00067972	n Filers)
4	Date	5 Full name of contributor	7 and of otata DAC (ID))	-	Amount of Contribution (\$)	
4	06/26/2023	Levitan, Joseph 6 Contributor address; City; Sta	out-of-state PAC (ID#:		'	Amount of Continuation (4)	\$25.00
•	Principal occu	Houston, TX 77098 pation / Job title (See Instructions)	lo.	Employer (See Instructions			
0	Not Employe		9	Not Employed)		
	Date 06/28/2023	Full name of contributor Levy, Alene Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$50.00
	Dringing conu	Houston, TX 77025 pation / Job title (See Instructions)	1	Employer (See Instructions	·/		
	Attorney	pation / 300 title (See mstructions)		Self Employed	·)		
	Date 06/30/2023	Full name of contributor Levy, Arlene Contributor address; City; Sta	out-of-state PAC (ID#:te; Zip Code)		Amount of Contribution (\$)	\$250.00
		Houston, TX 77056					
	•	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ea		Not Employed			
	Date Full name of contributor O6/30/2023 Levy, Susan Contributor address; City; State; Zip Code Houston, TX 77007		out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	<u> </u> 5)		
	Date 06/25/2023	Full name of contributor Ligon, Nancy Katharine Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu Artist	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	s)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/45 Rpt: 30/90	
2	FILER NAME Johnson, An	ın (The Honorable)		3	Filer ID (Ethics Commission 00067972	on Filers)
4	Date 06/29/2023	Full name of contributor)	7	Amount of Contribution (\$)	\$1.00
_		San Francisco, CA 94110				
8	Strategist	pation / Job title (See Instructions)	9 Employer (See Instructions) George P Johnson)		
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Lowenberg Law Firm PLLC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Houston, TX 77056 pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#: Lynn, Susan Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	Employer (See Instructions Not Employed)		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ MacLean, AJ Contributor address; City; State; Zip Code Jersey Village, TX 77040)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions Not Employed)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Manne, Neal Contributor address; City; State; Zip Code Houston, TX 77019			Amount of Contribution (\$)	\$1,000.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Susman Godfrey LLP)		

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 28/45 Rpt: 31/90	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		n (The Honorable)			00067972	
4	Date 06/28/2023	5 Full name of contributor out-of-state PAC (ID Marks, Kelly		7	Amount of Contribution (\$)	\$50.00
		6 Contributor address; City; State; Zip Code Chapel Hill, NC 27516				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	<u>. </u>		
	Exhibits Mar		Morehead Planetarium	,		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	06/19/2023	Martin, Grant				\$5.00
		Contributor address; City; State; Zip Code				
		Can Francisco CA 04115				
	Dringing coor	San Francisco, CA 94115	Employer (Coo Instructions	_		
	Consultant	pation / Job title (See Instructions)	Employer (See Instructions Grant Martin Campaigns			
		Full regree of contributes		, —	Amount of Contribution (\$)	
	Date 06/20/2023	Full name of contributor ut-of-state PAC (ID) Matthiesen, Dave	#:)		Amount of Contribution (\$)	\$2,500.00
	00/20/2023	Contributor address; City; State; Zip Code				Ψ2,300.00
		Contributor address, City, State, Zip Code				
		Houston, TX 77006				
		pation / Job title (See Instructions)	Employer (See Instructions			
	Attorney		Matthiesen & Associate	S		
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	06/28/2023	Mauro, Kyle				\$500.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78747				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	Consultant		HillCo Partners			
	Date	Full name of contributor out-of-state PAC (ID:	#:)		Amount of Contribution (\$)	
	06/28/2023	McAdams, Annie			, ,	\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005	<u> </u>	L		
		pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Attorney		Annie McAdams			

	MONET	ARY POLITICAL CONTRIBUTI	SCHEDULE A1		
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule A1: Sch: 29/45 Rpt: 32/90	
2	FILER NAME			3 Filer ID (Ethics Commission	n Filers)
	Johnson, An	n (The Honorable)		00067972	
4	Date 06/22/2023	 Full name of contributor uut-of-state PAC (IDa McElroy, Jim Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$)	\$10.00
		Austin, TX 78757			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)	
	Financial An	alyst	Health and Human Svcs	s Dept	
_	Date	Full name of contributor out-of-state PAC (ID:	#:)	Amount of Contribution (\$)	
	06/30/2023	McGuffee, Liz			\$250.00
		Contributor address; City; State; Zip Code			
		Nederland, CO 80466			
		pation / Job title (See Instructions)	Employer (See Instructions	3)	
	Not Employe		Not Employed		
	Date	Full name of contributor out-of-state PAC (ID	#:)	Amount of Contribution (\$)	
	06/28/2023	McKinney, Patrice			\$500.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77007			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	Attorney	pation / 300 title (300 mandetions)	Lanier Law Firm	·)	
		Full manner of contributors		Amount of Contribution (#)	
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID:	#:)	Amount of Contribution (\$)	\$250.00
	00/20/2023				Φ230.00
		Contributor address; City; State; Zip Code			
		Houston, TX 77006			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)	
	Consultant		K-Chase		
	Date	Full name of contributor out-of-state PAC (ID)	#:)	Amount of Contribution (\$)	
	06/29/2023	Merfish, Beth		()	\$500.00
		Contributor address; City; State; Zip Code			
		, ,, ,			
		Houston, TX 77009			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	······································	
	Associate Pr	rofessor	University of Houston C	lear Lake	

	MONET	ARY POLITICAL CONTRIBUT	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this	s form.	1 Total pages Schedule Sch: 30/45 Rpt: 33/9		
2	FILER NAME			3 Filer ID (Ethics Com	mission Filers)	
		n (The Honorable)		00067972		
4	Date 06/27/2023	5 Full name of contributor out-of-state PAC (ID Merfish, Gerald		7 Amount of Contribution	n (\$) \$2,500.00	
		6 Contributor address; City; State; Zip Code				
_		Houston, TX 77007	T	<u> </u>		
8	Principal occu Consultant	pation / Job title (See Instructions)	9 Employer (See Instructions Self	s)		
	Date	Full name of contributor out-of-state PAC (IE	D#:)	Amount of Contribution		
	06/27/2023	Merfish, Sherry		_	\$2,500.00	
		Contributor address; City; State; Zip Code				
		Houston, TX 77007				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Consultant		Self			
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution		
	06/28/2023	Montz, Elizabeth			\$500.00	
		Contributor address; City; State; Zip Code Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Not Employe		Not Employed	<i>-</i> ,		
	Date	Full name of contributor ut-of-state PAC (ID	D#:)	Amount of Contribution	n (\$)	
	06/30/2023	Mostyn, Amber			\$1,000.00	
		Contributor address; City; State; Zip Code				
		Houston, TX 77027				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Attorney		Mostyn Law Firm			
	Date	Full name of contributor out-of-state PAC (ID	D#:)	Amount of Contribution	n (\$)	
	06/27/2023	Neidig, Kati			\$100.00	
		Contributor address; City; State; Zip Code				
		Hayward, CA 94542				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ed	Not Employed			

2 FILER NAME Johnson, An 4 Date 06/26/2023 8 Principal occu Not Employe Date 06/30/2023 Principal occu Attorney Date 06/28/2023	Tull name of contributor out-of-state PAC (ID#: Norris, Wilfred Ocontributor address; City; State; Zip Code Huntingdon, PA 16652 Upation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: O'Rourke, Terence Contributor address; City; State; Zip Code Houston, TX 77025 Upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Oney, Jessica Oney, Jessica Out-of-state PAC (ID#: Out-of-state PAC (ID#: Oney, Jessica Out-of-state PAC (ID#: Out-of-state PAC (ID#: Oney, Jessica Out-of-state PAC (ID#: Out-of-state P	9 Employer (See Instruction Not Employed Employer (See Instruction Harris County District A	Amount of Contribution (\$) \$250.0
Johnson, An Johns	Tull name of contributor out-of-state PAC (ID#: Norris, Wilfred Ocontributor address; City; State; Zip Code Huntingdon, PA 16652 Upation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: O'Rourke, Terence Contributor address; City; State; Zip Code Houston, TX 77025 Upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Oney, Jessica Oney, Jessica Out-of-state PAC (ID#: Out-of-state PAC (ID#: Oney, Jessica Out-of-state PAC (ID#: Out-of-state PAC (ID#: Oney, Jessica Out-of-state PAC (ID#: Out-of-state P	9 Employer (See Instruction Not Employed) Employer (See Instruction Harris County District A	Amount of Contribution (\$) Amount of Contribution (\$) Amount of Contribution (\$) \$250.0 Attorney Amount of Contribution (\$)
4 Date 06/26/2023 8 Principal occur Not Employe Date 06/30/2023 Principal occur Attorney Date 06/28/2023	5 Full name of contributor out-of-state PAC (ID#: Norris, Wilfred 6 Contributor address; City; State; Zip Code Huntingdon, PA 16652 upation / Job title (See Instructions) ed Full name of contributor out-of-state PAC (ID#: O'Rourke, Terence Contributor address; City; State; Zip Code Houston, TX 77025 upation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#: Oney, Jessica	9 Employer (See Instruction Not Employed) Employer (See Instruction Harris County District A	7 Amount of Contribution (\$) \$10.0 Amount of Contribution (\$) \$250.0 Attorney Amount of Contribution (\$)
Principal occur Attorney Date 06/28/2023	Full name of contributor	Not Employed Employer (See Instruction Harris County District A	Amount of Contribution (\$) \$250.0 Is) Attorney Amount of Contribution (\$)
Principal occur Attorney Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_O'Rourke, Terence Contributor address; City; State; Zip Code Houston, TX 77025 Lipation / Job title (See Instructions) Full name of contributor out-of-state PAC (ID#:_Oney, Jessica	Not Employed Employer (See Instruction Harris County District A	Amount of Contribution (\$) \$250.0 Is) Attorney Amount of Contribution (\$)
Principal occu Attorney Date 06/28/2023	O'Rourke, Terence Contributor address; City; State; Zip Code Houston, TX 77025 Lipation / Job title (See Instructions) Full name of contributor	Employer (See Instruction Harris County District A	\$250.0 ss) Attorney Amount of Contribution (\$)
Date 06/28/2023 Principal occur	upation / Job title (See Instructions) Full name of contributor	Harris County District A	Attorney Amount of Contribution (\$)
Date 06/28/2023 Principal occur	Full name of contributor	Harris County District A	Attorney Amount of Contribution (\$)
06/28/2023 Principal occu	Oney, Jessica)	
•	Contributor address; City; State; Zip Code		
•	Austin, TX 78756		
Ji. Director	upation / Job title (See Instructions) of Government Affairs	Employer (See Instruction NRG	is)
Date 06/27/2023	Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$250.0
Principal occu	Houston, TX 77005 upation / Job title (See Instructions)	Employer (See Instruction	(25)
President	apadon, oob tale (eee medadabile)	Flora Lines	3)
Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Parker, Andrea Contributor address; City; State; Zip Code Nederland, TX 77627		Amount of Contribution (\$)
Principal occu	upation / Job title (See Instructions)	Employer (See Instruction Self Employed	IS)

	MONEI	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruc	ction Guide explains hov	v to complete this fo	rm.	1	Total pages Schedule A1: Sch: 32/45 Rpt: 35/90				
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)			
	Johnson, An	n (The Honorable)				00067972				
4	Date 06/30/2023	5 Full name of contributor Parker, Chris6 Contributor address; City; S	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$250.00			
8	Principal occu	Houston, TX 77081 pation / Job title (See Instructions	5)	Employer (See Instructions	<u>s)</u>					
Ü	Psychothera			Self Employed	٠,					
	Date 06/19/2023	Full name of contributor Paul, Herbert Contributor address; City; S Dallas, TX 75247	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$3.00			
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	 S)					
	Not Employe	ed		Not Employed						
	Date 06/19/2023	Full name of contributor Perdue Jr., Jim Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)	•	Amount of Contribution (\$)	\$2,000.00			
		Houston, TX 77027								
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)					
	Attorney			Perdue & Kidd						
	Date 06/27/2023	Full name of contributor Polan, Deborah Contributor address; City; S Austin, TX 78701	out-of-state PAC (ID#: tate; Zip Code)	•	Amount of Contribution (\$)	\$1,000.00			
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions Deborah Goodell Polan		>				
	Date 06/29/2023	Full name of contributor Polan, Gaye Contributor address; City; S Austin, TX 78703	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$250.00			
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)	Employer (See Instructions Not Employed	5)					

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instruc	ction Guide explains hov	v to complete this for	m.	1	Total pages Schedule A1: Sch: 33/45 Rpt: 36/90			
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)		
	Johnson, An	n (The Honorable)				00067972			
4	Date 06/29/2023	5 Full name of contributorPolan, Parker6 Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code		7	Amount of Contribution (\$)	\$1,500.00		
Ω	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	c) Q	Employer (See Instructions					
0	Attorney	pation / 300 title (See Instructions	5)	Briggle & Polan PLLC)				
	Date 06/26/2023	Full name of contributor Purser, Ray Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00		
	Dringing conu	Houston, TX 77006		Employer (See Instructions	·/				
	Consultant	pation / Job title (See Instructions	5)	Purser Public Affairs)				
	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)			
	06/30/2023	Radford, Pamela Contributor address; City; S	<u> </u>			(,)	\$1,000.00		
		Houston, TX 77009							
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)				
	Trial Consult	tant		Legal Media Inc.					
	Date 06/26/2023	Full name of contributor Raizner Slania LLP Contributor address; City; S Houston, TX 77006	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$3,500.00		
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)				
	Date 06/28/2023	Full name of contributor Randy Lee Public Affairs, Contributor address; City; S Austin, TX 78767)		Amount of Contribution (\$)	\$250.00		
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)				

	MONET	ARY POLITICAL CONTRIBUTI	IONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this	s form.	1	1 Total pages Schedule A1: Sch: 34/45 Rpt: 37/90	
2	FILER NAME	n (The Honorable)		3	Filer ID (Ethics Commission 00067972	on Filers)
4	Date 06/19/2023	Full name of contributor		7	Amount of Contribution (\$)	\$50.00
		Houston, TX 77008	.			
8	Principal occu Not Employe	pation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	5)		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID: Rosenau, Milton Contributor address; City; State; Zip Code Bellaire, TX 77401	#:)		Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe		Not Employed	_		
	Date 06/28/2023	Full name of contributor	#:)		Amount of Contribution (\$)	\$100.00
		Bellaire, TX 77401	_			
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed	s)		
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID: Rosenberg, Marci Contributor address; City; State; Zip Code Bellaire, TX 77401	#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	5)		
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID: Roth, Leonard Contributor address; City; State; Zip Code Houston, TX 77005	#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Self Employed	<u>(</u> 5)		
			•			

	MONEI	ARY POLITICAL (CONTRIBUTION	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 35/45 Rpt: 38/90	
2	FILER NAME				3	Filer ID (Ethics Commission	on Filers)
		n (The Honorable)	_			00067972	
4	Date 06/20/2023	5 Full name of contributorRothman, Robyn6 Contributor address; City; Si	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$40.00
		Houston, TX 77005					
8	Principal occu	pation / Job title (See Instructions	9	Employer (See Instructions	5)		
	Not Employe	ed		Not Employed			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/30/2023	Rubenstein, Andrew	_				\$1,000.00
		Contributor address; City; St	ate; Zip Code		1		
		Houston, TX 77024					
		pation / Job title (See Instructions	(3)	Employer (See Instructions		•	
	Lawyer			D. Miller & Associates P	LL	C 	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/20/2023	Schwartz, LyMonyanette					\$100.00
		Contributor address; City; St	ate; Zip Code				
		Houston, TX 77098					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Paralegal	(,	Matthews & Associates	,		
	Date	Full name of contributor	out-of-state PAC (ID#:	1	Г	Amount of Contribution (\$)	
	06/29/2023	Schwartz, LyMonyanette	out of state 1 740 (15#)		ranount of Continuation (¢)	\$100.00
	00,20,2020	Contributor address; City; St	ate: 7in Code		l		+200.00
		Contributor dudress, Oity, Oi	ato, 21p oode				
		Houston, TX 77098					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Paralegal			Matthews & Associates			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	06/24/2023	Shaddix, James					\$1,000.00
		Contributor address; City; St	ate; Zip Code		1		
		Houston, TX 77024	· · · · · · · · · · · · · · · · · · ·				
		pation / Job title (See Instructions	(i)	Employer (See Instructions	s)		
	Not Employe	ea		Not Employed			

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 36/45 Rpt: 39/90	
2	FILER NAME	ın (The Honorable)		3	Filer ID (Ethics Commission 00067972	on Filers)
4	Date 06/28/2023	Full name of contributor		7	Amount of Contribution (\$)	\$200.00
		Houston, TX 77005	_			
8	Principal occu Not Employe	ipation / Job title (See Instructions) ed	9 Employer (See Instructions Not Employed	5)		
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID# Shook, Kit Contributor address; City; State; Zip Code Houston, TX 77006	#:)		Amount of Contribution (\$)	\$250.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe	ed	Not Employed			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID# Skelly, Michael Contributor address; City; State; Zip Code	#:) 		Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77003				
	Principal occu Founder & C	pation / Job title (See Instructions) CEO	Employer (See Instructions Lazard	5)		
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID# Sloan, Anne Contributor address; City; State; Zip Code Houston, TX 77008	<u>#:</u>)		Amount of Contribution (\$)	\$500.00
	Principal occu Author	upation / Job title (See Instructions)	Employer (See Instructions Self Employed	5)		
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID# Sloan, John Contributor address; City; State; Zip Code Longview, TX 75601	#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions The Sloan Firm	5)		

	MONEI	DNETARY POLITICAL CONTRIBUTIONS				SCHEDULE A			
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 37/45 Rpt: 40/90			
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)		
	Johnson, An	n (The Honorable)				00067972			
4	Date 06/28/2023	5 Full name of contributorSmith, Peggy6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00		
		Houston, TX 77046	-						
8	Principal occu Professor	pation / Job title (See Instructions)	9	Employer (See Instructions Medical School	i)				
	Date 06/30/2023	Full name of contributor Sorola-Pohlman, Lenora Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code			Amount of Contribution (\$)	\$100.00		
	Principal occu	Houston, TX 77008 pation / Job title (See Instructions)	, <u> </u>	Employer (See Instructions	.) 				
	Sorola Ins. S		'	Insurance Broker	')				
	Date 06/26/2023	Full name of contributor Specht, Arthur Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$5.00		
		Fort Worth, TX 76112							
	Principal occu Contractor	pation / Job title (See Instructions)		Employer (See Instructions Self Employed	()				
	Date 06/29/2023	Full name of contributor Steen, Jesse Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1.00		
	•	pation / Job title (See Instructions)		Employer (See Instructions Map Health Managemen					
	Date 06/19/2023	Full name of contributor Stone, Lisa Contributor address; City; Sta Houston, TX 77096	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$36.00		
	Principal occu Educator	pation / Job title (See Instructions)		Employer (See Instructions Beth Israel)				

	MONET	ARY POLITICAL CONTRIBU	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete t	his for	n.	1	Total pages Schedule A1: Sch: 38/45 Rpt: 41/90	
2	FILER NAME	n (The Honorable)			3	Filer ID (Ethics Commission 00067972	on Filers)
4		 Full name of contributor)	7	Amount of Contribution (\$)	\$50.00
8	Principal occur	Crystal Beach, TX 77650 pation / Job title (See Instructions)	la	Employer (See Instructions	·/		
0	Not Employe			Not Employed	·)		
	Date 06/19/2023	Full name of contributor out-of-state PAC Strong, Pat Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		Houston, TX 77056			_		
	Principal occur Political Fund	pation / Job title (See Instructions) draiser		Employer (See Instructions Strong Strategies, LLC	5)		
	Date 06/26/2023	Full name of contributor out-of-state PAC Stuart, Cynthia Contributor address; City; State; Zip Code Fort Worth, TX 76132	(ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Musician/ Te	acher		Self Employed			
	Date 06/28/2023	Full name of contributor out-of-state PAC TALHI Life Insurance PAC Contributor address; City; State; Zip Code Austin, TX 78767)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/28/2023	Full name of contributor out-of-state PAC TEXPAC-STATEWIDE Contributor address; City; State; Zip Code Austin, TX 78701	(ID#:			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/45 Rpt: 42/90		
2	FILER NAME Johnson, An	nn (The Honorable)		3	Filer ID (Ethics Commission 00067972	on Filers)	
4	Date 06/30/2023	 Full name of contributor out-of-state PAC (ID#:_ Taylor, Heather Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$250.00	
8	Principal occu	Houston, TX 77019 upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u>			
_	PR Consulta	ant	RES	,			
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Association of Health Plans PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Optometric PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00	
		Austin, TX 78705					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ Thomas, Dolly Contributor address; City; State; Zip Code Houston, TX 77025			Amount of Contribution (\$)	\$25.00	
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)			
	Date 06/20/2023	Full name of contributor out-of-state PAC (ID#:_ Tritico, Christopher Contributor address; City; State; Zip Code Houston, TX 77008			Amount of Contribution (\$)	\$150.00	
	Principal occu Attorney	ipation / Job title (See Instructions)	Employer (See Instructions Tritico Rainey, PLLC)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 40/45 Rpt: 43/90	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
		ın (The Honorable)		L	00067972	
4	Date 06/19/2023	5 Full name of contributor out-of-state PAC (ID# Tucker, Eliot		7	Amount of Contribution (\$)	\$100.00
		6 Contributor address; City; State; Zip Code				
_	Dringing coor	Houston, TX 77019	Employer (Cap Instructions	<u>, </u>		
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions Self Employed	5)		
	Date	Full name of contributor ut-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	06/30/2023	Tummins, Debra				\$1,000.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77005				
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Not Employe	ea	Not Employed			
	Date	Full name of contributor ut-of-state PAC (ID#	:)		Amount of Contribution (\$)	****
	06/30/2023	Turek, Kenneth				\$250.00
		Contributor address; City; State; Zip Code San Diego, CA 92131				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Lawyer		Turek Law PC			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	06/30/2023	Tyler, Ella				\$100.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77024				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Writer		Self Employed			
	Date	Full name of contributor ut-of-state PAC (ID#	::)		Amount of Contribution (\$)	
	06/19/2023	Van Slyke, Glen				\$50.00
		Contributor address; City; State; Zip Code				
		Houston, TX 77098				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Attorney		Harris County			
			-			

	MONEI	DNETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instru	ction Guide explains how to	o complete this forr	n.	1	Total pages Schedule A1: Sch: 41/45 Rpt: 44/90			
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)		
	Johnson, An	n (The Honorable)				00067972			
4	Date 06/30/2023	5 Full name of contributorVela, Jose6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)	7	Amount of Contribution (\$)	\$500.00		
		Pearland, TX 77584							
8	Principal occu Lawyer	pation / Job title (See Instructions)	9	Employer (See Instructions Corral Vela LLP	5)				
	Date 06/30/2023	Full name of contributor Veselka, Larry Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$500.00		
		Houston, TX 77005		-	\overline{igcup}				
	Lawyer	pation / Job title (See Instructions)		Employer (See Instructions Smyser Kaplan & Vesell		LLP			
	Date 06/28/2023	Full name of contributor Vinson, Alia Contributor address; City; State	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00		
		Houston, TX 77019							
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Allen Boone Humphries		hinson I I D			
		Full control of control of the state of the	7	, .	- T				
	Date 06/28/2023	Full name of contributor Wagner, Mark Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$250.00		
		Gig Harbor, WA 98332							
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Law Offices of Mark C. \		gner			
	Date 06/27/2023	Full name of contributor Wallace, Stephen Contributor address; City; State	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00		
		Houston, TX 77005							
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions Not Employed	5)				

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 42/45 Rpt: 45/90	
2	FILER NAME Johnson, An	ın (The Honorable)		3	Filer ID (Ethics Commission 00067972	n Filers)
4	Date 06/29/2023	5 Full name of contributor out-of-state PAC (ID#:_ Ward, Wallace 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Houston, TX 77008 upation / Job title (See Instructions)	9 Employer (See Instructions			
0	Not Employe		Not Employed)		
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Warner, Freddy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Houston, TX 77019 upation / Job title (See Instructions)	Employer (See Instructions)		
		nment Relations Officer	Memorial Hermann	,		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ Waters, Jane Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Houston, TX 77018				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Not Employed)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Watt, Christopher Contributor address; City; State; Zip Code Houston, TX 77005			Amount of Contribution (\$)	\$300.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Reed Smith LLP)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Watters, Jeffrey Contributor address; City; State; Zip Code Houston, TX 77006			Amount of Contribution (\$)	\$500.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions Gray Reed & McGraw L			

	MONEI	ARY POLITICAL CON	ITRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to c	omplete this for	n.	l	otal pages Schedule A1: sch: 43/45 Rpt: 46/90	
2	FILER NAME				l	iler ID (Ethics Commission	n Filers)
	Johnson, An	n (The Honorable)			0	0067972	
4	Date 06/30/2023	 Full name of contributor	ut-of-state PAC (ID#: ip Code	_	7 A	mount of Contribution (\$)	\$2,000.00
		Houston, TX 77036					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Lawyer			Webster Vicknair MacLe	eod		
	Date 06/29/2023	Full name of contributor on Weil, Peter Contributor address; City; State; Z	ut-of-state PAC (ID#:)	A	mount of Contribution (\$)	\$100.00
		Houston, TX 77008					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 06/23/2023	Full name of contributor on the contributor of the contributor address; City; State; Z	ut-of-state PAC (ID#: ip Code)	A	mount of Contribution (\$)	\$100.00
		Houston, TX 77024					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Attorney	, ,		Weil & Associates	,		
	Date 06/29/2023	Full name of contributor on the weiss, Ted Contributor address; City; State; Z Houston, TX 77019	ut-of-state PAC (ID#:		A	mount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	:) [
	Not Employe	d		Not Employed			
	Date 06/26/2023	Full name of contributor of Old White, Lillian Contributor address; City; State; Z Perris, CA 92571	ut-of-state PAC (ID#: ip Code)	A	mount of Contribution (\$)	\$3.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions Not Employed	5)		

Austin, TX 78701 Principal occupation / Job title (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Principal occupation / Job title (See Instructions) Not Employed Date Go/30/2023 Williams, John Eddie Contributor address; City; State; Zip Code Houston, TX 77017 Principal occupation / Job title (See Instructions) Attorney Attorney Amount of Contribution (\$) \$250. Employer (See Instructions) Williams Hart & Boundas LLP Amount of Contribution (\$) \$250. Employer (See Instructions) Williams Hart & Boundas LLP Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$250. Employer (See Instructions) Baker Botts Amount of Contribution (\$)		MONET	ARY POLITICAL CONTRIBUT	TIONS	SCHEDULE A1
Johnson, Ann (The Honorable) 4 Date 5 Full name of contributor		The Instru	ction Guide explains how to complete thi	is form.	
Date S Full name of contributor out-of-state PAC (DN:	2				
Wholesale Beer Distributors of Texas PAC \$1,000. 6 Contributor address; City; State; Zip Code Austin, TX 78701 9 Principal occupation / Job title (See Instructions) Date Full name of contributor out-of-state PAC (IDIF			·		
Austin, TX 78701 Principal occupation / Job title (See instructions) Patient Pa	4		Wholesale Beer Distributors of Texas PAC		7 Amount of Contribution (\$) \$1,000.0
Principal occupation / Job title (See Instructions) Date O6/26/2023 Full name of contributor					
Date Of-26/2023 Williams, Gary S50. Contributor address; City, State; Zip Code Lake Jackson, TX 77566 Principal occupation / Job title (See Instructions) Not Employed Not Employed Date Full name of contributor out-of-state PAC (ID#:				<u> </u>	
O6/26/2023 Williams, Gary \$50. Contributor address; City; State; Zip Code Lake Jackson, TX 77566 Principal occupation / Job title (See Instructions) Not Employed Date O6/30/2023 Williams, John Eddie Contributor out-of-state PAC (ID#:	8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	15)
Contributor address; City; State; Zip Code Lake Jackson, TX 77566 Principal occupation / Job title (See Instructions) Not Employer Date O6/30/2023 Williams, John Eddie Contributor address; City; State; Zip Code Houston, TX 77017 Principal occupation / Job title (See Instructions) Attorney Date O6/28/2023 Full name of contributor Out-of-state PAC (ID#: O6/28/2023 Wood, Chauntelle Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions) Williams Hart & Boundas LLP Amount of Contribution (\$) \$250. Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Baker Botts Date O6/28/2023 Pull name of contributor out-of-state PAC (ID#: Date O6/28/2023 Principal occupation / Job title (See Instructions) Attorney Date Full name of contributor O6/28/2023 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$250. Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
Contributor address; City; State; Zip Code		06/26/2023	1		\$50.0
Principal occupation / Job title (See Instructions) Not Employed Date					
Principal occupation / Job title (See Instructions) Not Employed Date					
Principal occupation / Job title (See Instructions) Not Employed Date					
Not Employed Date Date O6/30/2023 Full name of contributor Out-of-state PAC (ID#:			Lake Jackson, TX 77566		
Date Full name of contributor out-of-state PAC (ID#:					ns)
O6/30/2023 Williams, John Eddie \$5,000. Contributor address; City; State; Zip Code Houston, TX 77017 Principal occupation / Job title (See Instructions) Attorney Date O6/28/2023 Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Attorney Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Employer (See Instructions) Baker Botts Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$250.		Not Employe	ed	Not Employed	
Contributor address; City; State; Zip Code Houston, TX 77017 Principal occupation / Job title (See Instructions) Attorney Date 06/28/2023 Wood, Chauntelle Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Attorney Baker Botts Date 06/28/2023 Full name of contributor O6/28/2023 Principal occupation / Job title (See Instructions) Attorney Baker Botts Date 06/28/2023 Yeoman, Lynn Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) \$250.			_ ····································	D#:)	Amount of Contribution (\$)
Principal occupation / Job title (See Instructions) Attorney Date O6/28/2023 Principal occupation / Job title (See Instructions) Williams Hart & Boundas LLP Amount of Contribution (\$) \$250. Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Attorney Baker Botts Date O6/28/2023 Full name of contributor out-of-state PAC (ID#:		06/30/2023	Williams, John Eddie		\$5,000.0
Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions)			Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Attorney Employer (See Instructions)			Houston TX 77017		
Attorney Date Full name of contributor out-of-state PAC (ID#:		Drincinal occu		Employer (See Instructions	l est
Date Full name of contributor out-of-state PAC (ID#:			pation / 300 title (See Instructions)		
Wood, Chauntelle \$250.					
Contributor address; City; State; Zip Code Houston, TX 77004 Principal occupation / Job title (See Instructions) Attorney Baker Botts Date 06/28/2023 Full name of contributor out-of-state PAC (ID#:) Yeoman, Lynn Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)			_ ····································	D#:)	
Houston, TX 77004 Principal occupation / Job title (See Instructions) Attorney Baker Botts Date O6/28/2023 Full name of contributor out-of-state PAC (ID#:) Yeoman, Lynn Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions)		00/28/2023			₩ \$250.0
Principal occupation / Job title (See Instructions) Attorney Baker Botts Date Full name of contributor out-of-state PAC (ID#:			Contributor address; City; State; Zip Code		
Principal occupation / Job title (See Instructions) Attorney Baker Botts Date Full name of contributor out-of-state PAC (ID#:					
Principal occupation / Job title (See Instructions) Attorney Baker Botts Date Full name of contributor out-of-state PAC (ID#:			Houston, TX 77004		
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) O6/28/2023 Yeoman, Lynn Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Principal occu		Employer (See Instructions	ns)
06/28/2023 Yeoman, Lynn \$250. Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Attorney		Baker Botts	
06/28/2023 Yeoman, Lynn \$250. Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions)		Date	Full name of contributor out-of-state PAC (I	D#:)	Amount of Contribution (\$)
Contributor address; City; State; Zip Code Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions)		06/28/2023	—		\$250.0
Houston, TX 77096 Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Principal occupation / Job title (See Instructions) Employer (See Instructions)			, ,, ,		
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
			Houston, TX 77096		
Not Employed Not Employed		Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)
· · · · · · · · · · · · · · · · · · ·		Not Employe	ed	Not Employed	

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 45/45 Rpt: 48/90	
2	FILER NAME Johnson, An	nn (The Honorable)		3		on Filers)
4	Date 06/26/2023	 Full name of contributor out-of-state PAC (ID#:_Young, Sharon Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
		Dallas, TX 75220	i	L		
8	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instruction: Not Employed	s)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Zilkha, Nina Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
		Houston, TX 77019		Ĺ		
	Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions Employed	s)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Zimmerman, Amanda Contributor address; City; State; Zip Code Houston, TX 77008)		Amount of Contribution (\$)	\$250.00
	Principal occu Attorney	Ipation / Job title (See Instructions)	Employer (See Instruction:	s)		

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 49/90 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Johnson, Ann (The Honorable) 00067972 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 6 Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 06/27/2023 Jones, Neal "Buddy" \$264.00 Event venue and 7 Contributor address; City; State; Zip Code refreshments Austin, TX 78746 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) Co-Founder HillCo Partners 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/33 Rpt: 50/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	06/19/2023	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,153.23	PO Box 441146
		Somerville, MA 02144
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online donation fees
		Crimic doriation lees
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/16/2023	Arnold, Elaine
H	Amount (\$)	Payee address; City; State; Zip Code
	\$120.00	7809 Valburn Dr.
		Austin, TX 78731
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Sine Die t-shirts
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	01/06/2023	Bantu Movers LLC
Н	Amount (\$)	Payee address; City; State; Zip Code
	\$1,547.32	15152 Bellaire Blvd.
		Houston, TX 77083
T	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment & Related Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Expense Check if Austin, TX, officeholder living expense
		Movers from Houston to Austin
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash		
ı		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
-	Total pages Caladula 51:	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1: Sch: 2/33 Rpt: 51/90	2 FILER NAME Johnson, Ann (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067972
4	Date	5 Payee name
	02/23/2023	Booker Victory Fund
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	600 Pennsylvania Ave. SE
		Suite 15180
		Washington, DC 20003
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Donation
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
H	Date	Payee name
	05/18/2023	City of West U Parks & Rec. Dept.
_	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	2631 Pittsburg
	Ψ1,230.00	2001 111330119
		West University Place, TX 77005
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Halloween Dash Event Sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/28/2023	City of West U Parks & Rec. Dept.
	Amount (\$)	Payee address; City; State; Zip Code
	\$150.00	2631 Pittsburg
	7_00.00	
		West University Place, TX 77005
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Table at July 4th celebration
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 3/33 Rpt: 52/90	2 FILER NAME Johnson, Ann (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067972
4	Date 04/17/2023	5 Payee name Clayton Spangler Photographic Design
6	Amount (\$) \$511.00	7 Payee address; City; State; Zip Code 235 Point Lick Dr.
		Charleston, WV 25306
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Panoramic Group Portrait of House of Representatives
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/30/2023	Payee name Darabi, Seyed Sawee Hosseini
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 418 Mignon Lane
		Houston, TX 77024
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Intern stipend
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/12/2023	Payee name Gables Republic Square
	Amount (\$) \$2,729.00	Payee address; City; State; Zip Code 401 Guadalupe St. #1505 Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Austin apartment rent
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
	Sch: 4/33 Rpt: 53/90	Johnson, Ann (The Honorable) 00067972	
4	Date	5 Payee name	
	02/02/2023	Gables Republic Square	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,500.00	401 Guadalupe St.	
		#1505	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		X Check if Austin, TX, officeholder living expense	
		Austin apartment rent	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
9	Complete ONLY if direct expenditure to benefit C/OI		
	Date	Payee name	
	02/16/2023	Gables Republic Square	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$84.28	401 Guadalupe St.	
		#1505	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Austin apartment expenses	
		/ double department expenses	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
_	Data		_
	Date 03/02/2023	Payee name Cables Popublic Square	
		Gables Republic Square	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00	401 Guadalupe St.	
		#1505	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Austin apartment rent	
		Ausun apartment tent	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/33 Rpt: 54/90	Johnson, Ann (The Honorable) 00067972
4 Date 03/10/2023	5 Payee name Gables Republic Square
6 Amount (t)	
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$37.28	401 Guadalupe St.
	#1505
	Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	X Check if Austin, TX, officeholder living expense
	Austin apartment expenses
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/03/2023	Gables Republic Square
Amount (\$)	Payee address; City; State; Zip Code
\$2,534.18	401 Guadalupe St.
, ,	#1505
	Austin, TX 78701
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense
	X Check if Austin, TX, officeholder living expense Austin apartment rent and expenses
	Austin apartment tent and expenses
Commission ONLL V if dispose	Condidate/Officeholder name Office sought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
05/02/2023	Gables Republic Square
Amount (\$)	Payee address; City; State; Zip Code
\$2,536.98	401 Guadalupe St.
	#1505
	Austin, TX 78701
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. X Check if Austin, TX, officeholder living expense
	Austin apartment rent and expenses
	Austin aparament rent and expenses
Complete CNII V if divers	Candidate/Officeholder name Office cought Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense 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 F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/33 Rpt: 55/90 Johnson, Ann (The Honorable) 00067972 4 Date Payee name 05/02/2023 Gables Republic Square 6 Amount (\$) Payee address; State; Zip Code \$2,538.91 401 Guadalupe St. #1505 Austin, TX 78701 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** X Check if Austin, TX, officeholder living expense Austin apartment rent and expenses Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/30/2023 **Grant Martin Campaigns** Amount (\$) Payee address; City; State; Zip Code \$1,528.10 2383 Bush St. San Francisco, CA 94115 **PURPOSE** (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 Print ad and consulting fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/18/2023 **Grant Martin Campaigns** Amount (\$) Payee address: City; State; Zip Code \$1,000.00 2383 Bush St. San Francisco, CA 94115 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Consulting Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Consulting fees Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/33 Rpt: 56/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	03/15/2023	Grant Martin Campaigns
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,502.21	2383 Bush St.
		San Francisco, CA 94115
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Print ad, website renewal, consulting fee
		Time da, website feriewal, consulting fee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	01/28/2023	Grant Martin Campaigns
_	Amount (\$)	Payee address; City; State; Zip Code
	\$2,070.47	2383 Bush St.
	Ψ2,010.41	2000 Bush ot.
		San Francisco, CA 94115
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense
	ZA ZHOHORZ	Check if Austin, TX, officeholder living expense
		Letterhead, envelopes and database
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OH	
_	D :	
	Date	Payee name
	06/23/2023	Guitar Center
	Amount (\$)	Payee address; City; State; Zip Code
	\$272.76	195 Yale Street
		Houston, TX 77008
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Speakers for Pride parade
		Speakers for Finde parade
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/33 Rpt: 57/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	01/30/2023	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,366.47	525 20th St.
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Payroll
		Fayioii
_	Operation ONLY if allowed	Our stide to 10 ff as health are are a second to the secon
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/27/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,366.47	525 20th St.
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin TX officeholder living expanse.
		Check if Austin, TX, officeholder living expense Payroll
		T ASTON
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	Davies same
	Date 03/30/2023	Payee name Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,366.47	525 20th St.
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Payroll
		Fayion
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/33 Rpt: 58/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	04/27/2023	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,366.47	525 20th St.
		San Francisco, CA 94107
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll
		1 dyron
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/30/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,366.47	525 20th St.
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll
		T dyroll
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	06/29/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,366.47	525 20th St.
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll
		Fayioli
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	•	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/33 Rpt: 59/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	01/12/2023	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,366.46	525 20th St.
		San Francisco, CA 94107
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Payroll
		. 33,101
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Dete	
	Date	Payee name
	02/14/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,366.46	525 20th St.
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll
		1 dyron
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨		
	Date	Payee name
	03/14/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,366.46	525 20th St.
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	ZA ZIIDII GIAZ	Check if Austin, TX, officeholder living expense
		Payroll
dash	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>	- Farmano to sonone or or	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 11/33 Rpt: 60/90	Johnson, Ann (The Honorable)	00067972
4	Date	5 Payee name	
	04/14/2023	Gusto	
6	Amount (\$) \$2,366.46	7 Payee address; City; State; Zip Code 525 20th St.	
		San Francisco, CA 94107	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/12/2023	Gusto	
	Amount (\$) \$2,366.46	Payee address; City; State; Zip Code 525 20th St.	
		San Francisco, CA 94107	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 06/14/2023	Payee name Gusto	
	Amount (\$) \$2,366.46	Payee address; City; State; Zip Code 525 20th St.	
		San Francisco, CA 94107	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 12/33 Rpt: 61/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	02/06/2023	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.37	525 20th St.
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Payroll processing fee
	l	a syron processing rec
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	03/02/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.37	525 20th St.
	1	
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Payroll processing fee
	l	a syron processing rec
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	04/12/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.37	525 20th St.
	, , ,	
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	-	Check if Austin, TX, officeholder living expense Payroll processing fee
		T dyfoli processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 13/33 Rpt: 62/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	05/03/2023	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.37	525 20th St.
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Payroll processing fee
		r ayroli processing lee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
<u> </u>	Data	
	Date	Payee name
	06/06/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.37	525 20th St.
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Payroll processing fee
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Oł	
_	_	
	Date	Payee name
	01/04/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$47.97	525 20th St.
L		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Payroll processing fee
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/33 Rpt: 63/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	02/14/2023	Gusto
6	Amount (\$) \$684.67	7 Payee address; City; State; Zip Code 525 20th St.
		San Francisco, CA 94107
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll processing fee
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/12/2023	Gusto
	Amount (\$) \$684.67	Payee address; City; State; Zip Code 525 20th St.
		San Francisco, CA 94107
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll processing fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 02/27/2023	Payee name Gusto
	Amount (\$) \$684.65	Payee address; City; State; Zip Code 525 20th St.
		San Francisco, CA 94107
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Payroll processing fee
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	·		Vages	s/Contract Labor		OTHER (enter	a category not listed abou	re)
				The Instruction (Suide explain	s how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 15/33 Rpt: 64/90		Johnson, Ar	nn (The Honor	able)					00067972		
4	Date	5	Payee name									
	01/30/2023		Gusto									
6	Amount (\$)	7	Payee addres	ss; City;	Stat	e; Zip Co	de					
	\$684.65		525 20th St.			·						
			San Erancic	co, CA 94107								
Ļ		_										
8	PURPOSE OF	(a)		e Categories listed a		chedule)	(b)	Description		df.T O	andata Cabadula T	
	EXPENDITURE		Salaries/Wa	ges/Contract	Labor					officeholder livin	nplete Schedule T.	
								Payroll proce			g capende	
								,				
9	Complete ONLY if direct	<u> </u>		ceholder name		Office sou	aht			Office h	ماط	
9	expenditure to benefit C/OI		Januluale/Onic	ceriolaei mame		Office 30u	gni			Office	Ciu	
_		_										
	Date		Payee name									
	03/14/2023		Gusto									
	Amount (\$)		Payee addres	ss; City;	Stat	e; Zip Co	de					
	\$681.67		525 20th St.									
			San Francis	co, CA 94107								
	PURPOSE	(a)	Category (Se	e Categories listed a	t the ton of this s	chedule)	(b)	Description				
	OF	``		ges/Contract		cricudic)			outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE			3				ш		officeholder livin	g expense	
								Payroll proce	ssi	ng fee		
	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	03/30/2023		Gusto									
	Amount (\$)		Payee addres	ss; City;	Stat	e; Zip Co	de					
	\$672.65		525 20th St.			·						
			San Erancic	co, CA 94107								
						-						
	PURPOSE OF	(a)		e Categories listed a		chedule)	(b)	Description	outoi	do of Toyon Cor	nplete Schedule T.	
	EXPENDITURE		Salaries/Wa	ges/Contract	Labor					officeholder livin		
								Payroll proce			g expense	
								, 1:	- **	5		
_	Complete ONLY if direct	Щ	Candidate/Offic	ceholder name		Office sou	aht			Office h	eld	
	expenditure to benefit C/OI						٠٠			200 1		
\vdash												

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		Gift/Awards/Memorials Expen mmittee Legal Services		nting Expen aries/Wage	se es/Contract Labor	Travel Out of Dis OTHER (enter a	strict category not listed above)
	Credit Card Payment		The Instruction Guide e	xplains how	to compl	lete this form.		
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID	(Ethics Commission Filers)
	Sch: 16/33 Rpt: 65/90		Johnson, Ann (The Honorable)				00067972	
4	Date	5	Payee name					
	04/13/2023		Gusto					
6	Amount (\$)	7	Payee address; City;	State; Zi	p Code			
	\$627.67		525 20th St.					
			San Francisco, CA 94107					
8	PURPOSE OF	(a)	Category (See Categories listed at the top	of this schedule) (b)	Description		
	EXPENDITURE		Salaries/Wages/Contract Labor			Check if travel outs Check if Austin, TX		
						Payroll process		CAPCING
						, ,	· ·	
9	Complete ONLY if direct		Candidate/Officeholder name	Office	e sought		Office he	eld
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	04/27/2023		Gusto					
	Amount (\$)		Payee address; City;	State; Zi	p Code			
	\$600.65		525 20th St.					
			San Francisco, CA 94107					
	PURPOSE	(a)	Category (See Categories listed at the top	of this schedule) (b)	Description		
	OF EXPENDITURE		Salaries/Wages/Contract Labor			Check if travel outs	side of Texas. Com (, officeholder living	
						Payroll process		гелрепас
						.,	3	
_	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name	Office	e sought		Office he	eld
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	05/12/2023		Gusto					
	Amount (\$)		Payee address; City;	State; Zi	p Code			
	\$593.92		525 20th St.					
			San Francisco, CA 94107					
	PURPOSE OF	(a)	Category (See Categories listed at the top	of this schedule) (b)	Description		
	EXPENDITURE		Salaries/Wages/Contract Labor			Check if travel outs Check if Austin, TX		•
						Payroll process		rexpense
							9 . 2 2	
	Complete ONLY if direct	Ь,	Candidate/Officeholder name	Office	e sought		Office he	eld
	expenditure to benefit C/OI				5			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/33 Rpt: 66/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	06/14/2023	Gusto
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$593.92	525 20th St.
		San Francisco, CA 94107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Payroll processing fee
_	Operation ONLY if allowed	On did to 10 ff as hald a grant Off as south
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/30/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$593.90	525 20th St.
		San Francisco, CA 94107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Payroll processing fee
		r dyron processing ree
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/29/2023	Gusto
	Amount (\$)	Payee address; City; State; Zip Code
	\$593.90	525 20th St.
		San Francisco, CA 94107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Payroll processing fee
_	Operation ONE VIII II	On didn't 10 ff a balden name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	p = 1 2 25 3/01	

SCHEDULE F1

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/33 Rpt: 67/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	01/09/2023	HEB
6	Amount (\$) \$177.51	7 Payee address; City; State; Zip Code 1000 East 41 St.
_		Austin, TX 78751
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office refreshments and snacks
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/05/2023	Home Depot
	Amount (\$) \$143.38	Payee address; City; State; Zip Code 5445 W. Loop South
		Houston, TX 77081
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Moving boxes and supplies
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/30/2023	Johnson, Ann
	Amount (\$) \$14.93	Payee address; City; State; Zip Code P.O. Box 56386
		Houston, TX 77256
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Reimbursement for Sched G expenditures
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete th	nis form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
l	Sch: 19/33 Rpt: 68/90	Johnson, Ann (The Honorable)	00067972
4	Date	5 Payee name	•
l	06/30/2023	Johnson, Ann	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$414.01	P.O. Box 56386	
l			
		Houston, TX 77256	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
ľ	OF		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
		Rei	imbursement for Sched G expenditures
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
L	experialture to beliefit C/OI	'	
Г	Date	Payee name	
l	06/28/2023	Johnson, Ann	
Г	Amount (\$)	Payee address; City; State; Zip Code	
	\$286.98	P.O. Box 56386	
l			
		Houston, TX 77256	
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription
	OF EXPENDITURE	Loan Repayment/Reimbursement \Box	Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE		Check if Austin, TX, officeholder living expense
		Rei	imbursement for Sched G expenditures
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
⊨	Data		
l	Date 05/16/2023	Payee name Johnson, Ann	
┡			
l	Amount (\$) \$286.48	Payee address; City; State; Zip Code P.O. Box 56386	
l	\$280.48	P.O. BOX 50380	
l		11. 12. TV 77050	
L		Houston, TX 77256	
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Des	scription Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Loan Repayment L	Check if travel outside of Texas. Complete Scriedule 1. Check if Austin, TX, officeholder living expense
l		· · · · · · · · · · · · · · · · · · ·	imbursement for Sched G expenditures
			·
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
H			
l			

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form	l.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 20/33 Rpt: 69/90	Johnson, Ann (The Honorable)	00067972
4	Date	5 Payee name	
	03/28/2023	Johnson, Ann	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$576.19	P.O. Box 56386	
		Houston, TX 77256	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descriptio	n
	OF EXPENDITURE	Edan Repayment Rembarsement	travel outside of Texas. Complete Schedule T.
			Austin, TX, officeholder living expense sement for Sched G expenditures
		Keimbark	Sement for School S experialitates
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		
_	Date	Payee name	
	02/16/2023	Johnson, Ann	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$104.89	P.O. Box 56386	
	Ψ10 1.00	1 101 Box 66666	
		Houston, TX 77256	
	PURPOSE		n
	OF	, , ,	travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if	Austin, TX, officeholder living expense
		Reimburs	sement for Sched G expenditures
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/01/2023	Johnson, Ann	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$76.98	P.O. Box 56386	
		Houston, TX 77256	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Loan Repayment Clinibal Sement	travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
			sement for Sched G expenditures
			, , , , , , , , , , , , , , , , , , ,
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 21/33 Rpt: 70/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	01/28/2023	Johnson, Ann
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$430.77	P.O. Box 56386
		Houston, TX 77256
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Reimbursement for Sched G expenditures
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/24/2023	Johnson, Ann
	Amount (\$)	Payee address; City; State; Zip Code
	\$171.22	P.O. Box 56386
		Houston, TX 77256
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Loan Repayment/Reimbursement Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Reimbursement of Schedule G expenditures
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	01/03/2023	Legislative Study Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 12943
	,_,,,,,,,,	
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Membership dues
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/33 Rpt: 71/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	06/30/2023	Middleton, Kacy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	425 Shady Lane
		Southlake, TX 76092
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Intern stipend
		intern superior
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/14/2023	NGP Van
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,215.24	655 15th St., N.W.
		Suite 650
		Washington, DC 20005
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Database software
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit G/OI	
	Date	Payee name
	06/23/2023	Party City
	Amount (\$)	Payee address; City; State; Zip Code
	\$99.75	5441 N. I-35
		Austin, TX 78723
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Pride parade supplies
		Filue paraue supplies
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
_	Sch: 23/33 Rpt: 72/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	03/06/2023	Ready Refresh
6	Amount (\$)	7 Payee address; City; State; Zip Code
٠	\$6.05	215 6661 Dixie Hwy
	Ψ0.00	Suite 4
		Louisville, KY 40258
_	DUDDOOF	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Drinking water for office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/06/2023	Ready Refresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$5.08	215 6661 Dixie Hwy
		Suite 4
		Louisville, KY 40258
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Drinking water for office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/09/2023	Ready Refresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$65.12	215 6661 Dixie Hwy
		Suite 4
		Louisville, KY 40258
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Drinking water for office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/33 Rpt: 73/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	03/30/2023	Ready Refresh
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$38.97	215 6661 Dixie Hwy
		Suite 4
		Louisville, KY 40258
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Drinking water for office
		Difficility water for office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/07/2023	Ready Refresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.04	215 6661 Dixie Hwy
		Suite 4
		Louisville, KY 40258
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Drinking water for office
		Difficility water for office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/07/2023	Ready Refresh
	Amount (\$)	Payee address; City; State; Zip Code
	\$6.05	215 6661 Dixie Hwy
		Suite 4
		Louisville, KY 40258
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	-	Check if Austin, TX, officeholder living expense Drinking water for office
		Difficing water for office
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services							
		_			ide explains now to	comp	iete this form.	_			
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission	Filers)
	Sch: 25/33 Rpt: 74/90		Johnson, Ar	nn (The Honoral	ole)				00067972		
4	Date	5	Payee name								
	04/20/2023		Ready Refre	esh							
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip	Code					
	\$58.54		215 6661 D	ixie Hwy							
			Suite 4	-							
			Louisville, K	V 40258							
Ļ	DUDDOCE	(0)				/h	\				
8	PURPOSE OF	(a)		e Categories listed at th		(0)	Description Check if travel	outei	ido of Toyas Cor	nplete Schedule T.	
	EXPENDITURE		Office Overr	nead/Rental Exp	ense		=		, officeholder livin		
							Drinking wate				
							_				
9	Complete ONLY if direct			ceholder name	Office	ought			Office h	eld	
	expenditure to benefit C/O	Н									
	Date		Payee name				· · · · · · · · · · · · · · · · · · ·				
	05/12/2023		Ready Refre	esh							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$6.05		215 6661 D	ixie Hwy							
			Suite 4								
			Louisville, K	Y 40258							
_	PURPOSE	(a)				(h) Description				
	OF	(۳)		e Categories listed at the		(5)	_ `	outsi	ide of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Office Overi	ieau/Neritai Exp	Jense		=		, officeholder livin		
							Drinking wate	er fo	or office		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	ought			Office h	eld	
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	05/18/2023		Ready Refre	esh							
	Amount (\$)		Payee addres	ss; City;	State; Zip	Code					
	\$65.12		215 6661 D	ixie Hwy							
			Suite 4								
			Louisville, K	Y 40258							
	PURPOSE	(a)		e Categories listed at th		(h) Description				
	OF	(")		nead/Rental Exp		(5)		outsi	ide of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Office Over	read/Nemai Exp	701130		Check if Austin	ı, TX	, officeholder livin	g expense	
							Drinking wate	er fo	or office		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office	ought			Office h	eld	
	expenditure to benefit C/OI	Н									
1											

SCHEDULE F1

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total nagge Schodule F1:		_
	Total pages Schedule F1: Sch: 26/33 Rpt: 75/90	Johnson, Ann (The Honorable) 3 Filer ID (Ethics Commission Filers) 00067972	
4	Date	5 Payee name	
	06/05/2023	Ready Refresh	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$6.05	215 6661 Dixie Hwy	
		Suite 4	
		Louisville, KY 40258	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Drinking water for office	
<u> </u>	0 1. 0		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	_
L	06/30/2023	Roy, Katelyn	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,500.00	5010 Manucso Lane	
		Apt. 515	
		Baton Rouge, LA 70809	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Intern stipend	
		mem superio	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	•		_
	Date	Payee name	
	01/11/2023	Strong Strategies, LLC	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,075.00	325 W. 18th St.	
		Houston, TX 77008	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Fundraising & compliance services and expenses	
		T anataioning & compliance services and expenses	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		ĺ
			-

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		ttee Leç	gal Services	S		ages	/Contract Labor		OTHER (ente		not listed above)	
			Th	e Instruction Gu	uide explains ho	w to com	nple	ete this form.					
1	Total pages Schedule F1:	2 FIL	LER NAME						3	Filer ID	(Ethic	s Commission Filers)
	Sch: 27/33 Rpt: 76/90	Jo	hnson, Ann	(The Honora	ble)					00067972	2		
4	Date	5 Pa	yee name										
	01/14/2023	Sti	rong Strateg	jies, LLC									
6	Amount (\$)	7 Pa	yee address;	City;	State; 2	Zip Cod	le						
	\$6,295.45	32	25 W. 18th S	it.									
		 Hc	ouston, TX 7	7008									
8	PURPOSE					1,	(h)	Description					
ľ	OF				ne top of this schedu	ule)	(D)	Description Check if travel of	outsi	de of Texas. Co	omplete Sch	nedule T.	
	EXPENDITURE		onsulting Ex	perise				Check if Austin,					
								Fundraising &	& co	ompliance	service	s and expenses	
9	Complete ONLY if direct		ndidate/Officel	nolder name	Offi	ice soug	ht			Office	held		
	expenditure to benefit C/OI	Н											
	Date	Pa	yee name										_
	03/08/2023	l	rong Strateg	jies, LLC									
	Amount (\$)	Pa	yee address;	City;	State; 2	Zip Cod	le						
	\$2,001.80	32	25 W. 18th S	t.									
		l _{Ho}	ouston, TX 7	7008									
	PURPOSE					[(h)	Description					
	OF	ı	onsulting Ex		ne top of this schedu	lie)	(~)	Check if travel	outsi	de of Texas. Co	omplete Sch	nedule T.	
	EXPENDITURE		onsuling Ex	perioe				Check if Austin,	, TX,	officeholder liv	ing expense	е	
								Campaign fin	and	ce & comp	liance s	services	
	Complete ONLY if direct		ndidate/Officel	nolder name	Offi	ice soug	ht			Office	held		
	expenditure to benefit C/OI	Н											
	Date	Pa	yee name										
	05/18/2023	Sti	rong Strateg	jies, LLC									
	Amount (\$)	Pa	yee address;	City;	State; 2	Zip Cod	le						
	\$1,000.63	32	25 W. 18th S	t.									
		Ho	ouston, TX 7	7008									
	PURPOSE				ne top of this schedu	_{ile)} ((b)	Description					
	OF		onsulting Ex		ic top of this serieuc		. ,	Check if travel	outsi	de of Texas. Co	mplete Sch	nedule T.	
	EXPENDITURE		3	•				Check if Austin,					
								Campaign fin	and	ce & comp	liance s	services	
	Complete ONLY if direct expenditure to benefit C/OH		ndidate/Officel	nolder name	Offi	ice soug	ht			Office	held		
	experiorare to benefit C/Of	1											

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Onations 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 Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 28/33 Rpt: 77/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	06/11/2023	Strong Strategies, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,003.78	325 W. 18th St.
		Houston, TX 77008
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign finance & compliance services
		Campaign infance & compliance services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payee name
	06/16/2023	
		Strong Strategies, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,451.13	325 W. 18th St.
		Houston, TX 77008
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign finance & compliance services
		Campaign infance & compilance services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	06/30/2023	Payee name Strong Strategies, LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,870.12	325 W. 18th St.
		Houston, TX 77008
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign finance & compliance services
		Campaign infance & compliance services
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Printing Expense Salaries/Wages/Contract Labor 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 F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 29/33 Rpt: 78/90 Johnson, Ann (The Honorable) 00067972 4 Date Payee name 03/15/2023 TX Caucus on Climate Environment & Energy 6 Amount (\$) Payee address; City; State; Zip Code \$200.00 P.O. Box 301074 Austin, TX 78703 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees **EXPENDITURE** Check if Austin, TX, officeholder living expense **Dues for Biennium** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/05/2023 Texas House of Representatives Amount (\$) Payee address; City; State; Zip Code \$50.00 P.O. Box 2910 Austin, TX 78768 **PURPOSE** (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 Two photos of Rep. Johnson on House floor Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/05/2023 Texas House of Representatives Amount (\$) Payee address: City; State; Zip Code \$32.48 P.O. Box 2910 Austin, TX 78768 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Advertising Expense Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Two Texas flags Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 30/33 Rpt: 79/90	Johnson, Ann (The Honorable) 00067972
4	Date	5 Payee name
	03/15/2023	Timbergrove Manor Neighborhood Assoc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.00	P.O. Box 7723
		Houston, TX 77270
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
		Ruit the Grove Sponsorship
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
\vdash	Date	Davida nama
		Payee name
	05/11/2023	Walmart
	Amount (\$)	Payee address; City; State; Zip Code
	\$265.76	5405 S. Rice Ave.
		Houston, TX 77081
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office refreshments and snacks
		Office refreshifients and shacks
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Davies warms
	Date	Payee name
	06/30/2023	White, Emma Claire
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2911 Ella Lee Lane
		Houston, TX 77019
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense Intern stipend
		intern superio
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

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

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

Contributions/ Donations Made By - Candidate/Officeholder/Political Commi Credit Card Payment			mmittee	Gift/Awards/Memorials Legal Services	•		ages.	/Contract Labor		Travel Out of DOTHER (enter	istrict a category not listed above)	
		_		The Instruction G	uide explains	how to cor	mple	ete this form.				
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission File	ers)
	Sch: 31/33 Rpt: 80/90		Johnson, Ai	nn (The Honora	ble)					00067972		
4	Date	5	Payee name									
L	02/27/2023	L	Zoom Video	Communicatio	ns Inc.							
6	Amount (\$)	7	Payee addres	ss; City;	State	; Zip Co	de					
	\$15.98		55 Almaden	Blvd.								
			6th Floor									
			San Jose, C	A 95113								
8	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Exp				_			mplete Schedule T.	
								_		officeholder livi	ng expense	
								Teleconferen	CILI	y soliware		
9	Complete ONLY if direct	<u> </u>	Candidate/O#:	ceholder name		Office soug	ah+			Office I	neld	
9	expenditure to benefit C/O		canunate/OIII	Jenoluel Hallie	(Juice Sou(yııı			Office f	iciu	
⊨	Date	Г	Payee name									
	03/16/2023		,	Communicatio	ns Inc							
_		\vdash				; Zip Co	de					
	Amount (\$) \$15.99		Payee addres	•	State;	, ∠ıµ C0ı	uC					
	Ф10.99			ыvu.								
			6th Floor									
			San Jose, C	A 95113		 						
	PURPOSE OF	(a)		e Categories listed at t		nedule)	(b)	Description		d- 4T- C	andata Cabadal T	
	EXPENDITURE		Office Overl	nead/Rental Ex	pense			=		de of Texas. Co officeholder livi	mplete Schedule T. ng expense	
								Teleconferen			0 - k	
	Complete ONLY if direct		Candidate/Offi	ceholder name	C	Office sou	ght			Office I	neld	
	expenditure to benefit C/O	н										_
	Date		Payee name									
	03/27/2023		Zoom Video	Communicatio	ns Inc.							
	Amount (\$)		Payee addres	ss; City;	State;	; Zip Co	de					
	\$17.05		55 Almaden	Blvd.								
			6th Floor									
			San Jose, C	A 95113								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Office Overl	nead/Rental Exp	pense						mplete Schedule T.	
										officeholder livi	ng expense	
								Teleconferen	CIII	y sonware		
	Complete ONLY if direct	Ц	Candidate/Offi	ceholder name	(Office soug	aht			Office I	neld	
	expenditure to benefit C/O			zz.io.ao. namo		55 554(c			3,,,,,,,		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment		The Instruction Guide explains how to co	mple	ete this form.		
1	Total pages Schedule F1:	2	FILER NAME		3 Filer	ID	(Ethics Commission Filers)
	Sch: 32/33 Rpt: 81/90		Johnson, Ann (The Honorable)		0006	67972	
4	Date	5	Payee name				
	04/17/2023		Zoom Video Communications Inc.				
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode			
	\$15.99		55 Almaden Blvd.				
			6th Floor				
			San Jose, CA 95113				
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Te		
					Check if Austin, TX, officehor Teleconferencing soft		expense
					releasing son	ware	
9	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office sou	l laht	(Office he	eld
ľ	expenditure to benefit C/OI		0.100 000	·9···			
_	Date	Π	Payee name				
	04/27/2023		Zoom Video Communications Inc.				
	Amount (\$)	┝	Payee address; City; State; Zip Co	nde			
	\$17.05		55 Almaden Blvd.	Juc			
	411.00		6th Floor				
			San Jose, CA 95113				
	DUDDOCE	(6)		/b)			
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(a)	Description Check if travel outside of Te	exas. Com	nlete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense		Check if Austin, TX, officeh		
					Teleconferencing sof	ware	
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ight	(Office he	eld
	expenditure to benefit C/OI	Н					
	Date		Payee name				
	05/15/2023		Zoom Video Communications Inc.				
	Amount (\$)		Payee address; City; State; Zip Co	ode			
	\$15.99		55 Almaden Blvd.				
			6th Floor				
			San Jose, CA 95113				
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description		
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Te		
	EXI ENDITORE				Check if Austin, TX, officeh		expense
					Teleconferencing sof	ware	
	Complete ONLY if direct	Ц	Candidate/Officeholder name Office sou	laht		Office he	ald
	expenditure to benefit C/O		Candidate/Oniceriolder Hairie Office Sou	igill	(JIIICE HE	สน
l							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment		The Instruction Guide explains how to co	omple	ete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 33/33 Rpt: 82/90		Johnson, Ann (The Honorable)		00067972
4	Date	5	Payee name		·
	05/30/2023		Zoom Video Communications Inc.		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$17.05		55 Almaden Blvd.		
			6th Floor		
			San Jose, CA 95113		
8	PURPOSE	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense
					Teleconferencing software
9	Complete ONLY if direct	_	Candidate/Officeholder name Office so	laht	Office held
9	expenditure to benefit C/O		Candidate/Officeholder name Office so	ugnt	Office field
_	Data	_			
	Date		Payee name		
	06/15/2023	L	Zoom Video Communications Inc.		
	Amount (\$)		Payee address; City; State; Zip C	ode	
	\$15.99		55 Almaden Blvd.		
			6th Floor		
			San Jose, CA 95113		
	PURPOSE OF	(a	Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Teleconferencing software
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	<u>I</u> ught	Office held
	expenditure to benefit C/O	Н			
	Date	Г	Payee name		
	06/27/2023		Zoom Video Communications Inc.		
	Amount (\$)	┝	Payee address; City; State; Zip C	nde	
	\$17.05		55 Almaden Blvd.	ouc	
	Ψ11.00		6th Floor		
			San Jose, CA 95113		
	DUDD 0.05				<u></u>
	PURPOSE OF	(a	Category (See Categories listed at the top of this schedule)	(a)	Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense
					Teleconferencing software
	Complete ONLY if direct		Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/O	Н			
4					

SCHEDULE G

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politics Credit Card Payment		mmittee	Gift/Awards/Memorials Legal Services The Instruction Gu	Expense		xpense Nages/Contract Labor		Travel Out of District OTHER (enter a category not listed abo	ve)
1	Total pages Schedule G:	2	FILER NAME	Ī				3	Filer ID (Ethics Commission	n Filers)
	Sch: 1/8 Rpt: 83/90		Johnson, A	nn (The Honora	ble)				00067972	
4	Date	5	Payee name							
	01/09/2023		AT&T							
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode			
	\$55.31		P.O. Box 50	014						
	Reimbursement from political contributions intended		Carol Strea	m, IL 60197-501	L4					
8	PURPOSE	(a)	Category (s	ee Categories listed at tl	ne top of this sch	edule)	(b) Description	=	heck if travel outside of Texas. Complete	
	OF EXPENDITURE	l	Office Over	head/Rental Exp	oense		_		heck if Austin, TX, officeholder living expe	ense
							Austin apartmen	t int	ternet	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought		Office held	
	Date		Payee name							
	06/19/2023		AT&T							
	Amount (\$)	T	Payee addre	ss; City;	State;	Zip Co	ode			
	\$55.58		P.O. Box 50	014						
	Reimbursement from									
	x political contributions intended		Carol Strea	m, IL 60197-501	L 4					
	PURPOSE	T	Category (s	ee Categories listed at tl	ne top of this sch	edule)	Description	Ch	heck if travel outside of Texas. Complete	Schedule T.
	OF EXPENDITURE		Office Over	head/Rental Exp	oense		[X Cr	heck if Austin, TX, officeholder living expe	ense
	LAPENDITORE						Austin apartmen	t int	ternet	
		Car	ndidate/Office	holder name			Office sought		Office held	
	expenditure to benefit C/OH									
		_								
	Date		Payee name							
	01/22/2023	╙	Amazon							
	Amount (\$)		Payee addre	-	State;	Zip Co	ode			
	\$334.26	l	410 Terry A	ve. North						
	Reimbursement from political contributions intended		Seattle, WA	98109						
	PURPOSE		Category (s	ee Categories listed at tl	ne top of this sch	edule)	Description	=	heck if travel outside of Texas. Complete	
	OF EXPENDITURE		Office Over	head/Rental Exp	oense		L	Cr	heck if Austin, TX, officeholder living expe	ense
							Office supplies			
	Complete ONLY if direct expenditure to benefit C/OH	Car	ndidate/Office	holder name			Office sought		Office held	

SCHEDULE G

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

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services	Office Ov Polling E Printing E Salaries/	Expense Wages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
		The Instruction Guide explains	s how to c	omplete this form.		
1	Total pages Schedule G:	2 FILER NAME			3	Filer ID (Ethics Commission Filers)
	Sch: 2/8 Rpt: 84/90	Johnson, Ann (The Honorable)				00067972
4	Date	5 Payee name				
	01/13/2023	Amazon				
6	Amount (\$)	7 Payee address; City; State	e; Zip C	ode		
	\$96.51	410 Terry Ave. North				
	Reimbursement from					
	X political contributions intended	Seattle, WA 98109				
8	PURPOSE	(a) Category (See Categories listed at the top of this so	chedule)	(b) Description	7 c	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overhead/Rental Expense			c	heck if Austin, TX, officeholder living expense
	EXPENDITURE	·		Office supplies		
9		Candidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH					
	Date	Payee name				
	04/24/2023	Amazon				
	Amount (\$)	Payee address; City; State	e; Zip C	ode		
	\$49.90	410 Terry Ave. North				
	Reimbursement from political contributions					
	x political contributions intended	Seattle, WA 98109				
	PURPOSE	Category (See Categories listed at the top of this so	chedule)	Description	С	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Food/Beverage Expense			С	heck if Austin, TX, officeholder living expense
	LXI LINDITORE			Bottled water for	off	ice
		Candidate/Officeholder name		Office sought		Office held
	expenditure to benefit C/OH					
	D-4-					
	Date	Payee name				
	03/18/2023	Amazon				
	Amount (\$)	' ' '	e; Zip C	ode		
	\$92.40	410 Terry Ave. North				
	Reimbursement from political contributions					
	intended	Seattle, WA 98109				
	PURPOSE	Category (See Categories listed at the top of this so	chedule)	Description	=	heck if travel outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Overhead/Rental Expense		L	С	heck if Austin, TX, officeholder living expense
				Office supplies		
	Complete ONLY if direct expenditure to benefit	Candidate/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

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Travel Out	vel in District vel Out of District HER (enter a category not listed above)			
			The Instruction Guide explains I	how to co	omplete this form.	_		
1	Total pages Schedule G:	2 FILER NAME	Ξ			3	Filer ID	(Ethics Commission Filers)
	Sch: 3/8 Rpt: 85/90	Johnson, A	nn (The Honorable)				000679	972
4	Date	5 Payee name				•		
	06/21/2023	Amazon						
6	Amount (\$)	7 Payee addre	ess; City; State;	Zip Co	ode			
	\$32.43	410 Terry A		•				
	Reimbursement from	_						
	x political contributions intended	Seattle, WA	\ 0.01.00					
_					la. 5 · .:	7	1.76	
8	PURPOSE OF	1	ee Categories listed at the top of this scho	edule)	(b) Description	=		I outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	EXPENDITURE	Event Expe	ense		L	_		n, rx, unicendiaer living expense
					Pride parade sup	opiie	:5	
Ļ		<u> </u>						
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought			Office held
	C/OH							
	Date	Doves nome						
	06/22/2023	Payee name Amazon						
			0''	7: 0				
	Amount (\$)	Payee addre	•	Zip Co	ode			
	\$312.81	410 Terry A	Ave. North					
	Reimbursement from political contributions							
	intended	Seattle, WA	A 98109					
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description [=		l outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Event Expe	ense			_		n, TX, officeholder living expense
					Pride parade sup	oplie	es	
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit C/OH							
	5 .	1						
	Date	Payee name						
	02/01/2023	City of Aust						
	Amount (\$)	Payee addre		Zip Co	ode			
	\$76.98	P.O. Box 2:	267					
	Reimbursement from political contributions							
	intended	Austin, TX	78783					
	PURPOSE	Category (s	ee Categories listed at the top of this sch	edule)	Description	Ch	eck if trave	l outside of Texas. Complete Schedule T.
	OF EXPENDITURE	Office Over	head/Rental Expense			χ Ch	eck if Austi	n, TX, officeholder living expense
	LXI LINDITORL				Austin apartment	t util	lities	
		Candidate/Office	holder name		Office sought			Office held
	expenditure to benefit C/OH							
_	0,011							

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Food/Beverage Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Ex Legal Services The Instruction Guid			Vages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2 FILER NAM					3	Filer ID (Ethics Commission Filers)		
ľ	Sch: 4/8 Rpt: 86/90		Ann (The Honorabl	e)			ľ	00067972		
4	Date	5 Payee name	е							
	03/09/2023	City of Aus	stin							
6	Amount (\$)	7 Payee addre	ess; City;	State:	Zip Co	nde				
ľ	\$76.14	P.O. Box 2		Otato,	_ .p	, do				
		1.0.00.2	.201							
	X Reimbursement from political contributions intended	Austin, TX	78783							
8	PURPOSE	(a) Category (s	See Categories listed at the	top of this sche	edule)	(b) Description	Cl	heck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Office Ove	rhead/Rental Expe	nse			X CI	heck if Austin, TX, officeholder living expense		
	LXI ENDITORE					Austin apartmen	nt utilities			
9	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office					Office sought		Office held		
	Date	Payee name	e							
	04/06/2023	City of Aus								
H	Amount (\$)			State.	Zin Co	nde				
	\$95.74	1	Payee address; City; State; Zip Code P.O. Box 2267							
		F.O. BOX 2	.201							
	X Reimbursement from political contributions intended	Austin, TX	78783							
	PURPOSE	Category (See Categories listed at the	top of this sche	edule)	Description	CI	heck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Office Ove	rhead/Rental Expe	nse			X CI	heck if Austin, TX, officeholder living expense		
	EXPENDITORE					Austin apartmen	t uti	ilities		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name			Office sought		Office held		
F	Date	Davis a name	_							
	04/20/2023	Payee name								
L		City of Aus								
	Amount (\$)	Payee addre		State;	Zip Co	ode				
	\$97.04	P.O. Box 2	267							
	Reimbursement from									
	X political contributions intended	Austin, TX	78783							
\vdash	PURPOSE		See Categories listed at the	ton of this sche	edule)	Description	CI	heck if travel outside of Texas. Complete Schedule T.		
	OF	1			suuic)	·	_	heck if Austin, TX, officeholder living expense		
	EXPENDITURE Office Overhead/Rental Expense Austin apartment utilities						ilities			
						aparamen	. 41	····		
\vdash	Complete ONLY if direct	Condidate/Office	shaldar name			Office country		Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit	Carididate/Office	enoluer 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/Political Committee Credit Card Payment		nmittee	Legal Services	morials Expense				Travel in Di Travel Out o OTHER (en		above)
1 Total pages Schedule G: 2 FILER NA			FILER NAME	R NAME 3					Filer ID	(Ethics Commissi	on Filers)
L	Sch: 5/8 Rpt: 87/90	n: 5/8 Rpt: 87/90 Johnson, Ann							000679	72	
4	Date	5 Payee name						_			
L	05/05/2023	L	City of Aust	in							
6	Amount (\$)	7	Payee addre	ress; City; State; Zip Code							
	\$97.04		P.O. Box 22	267							
	Reimbursement from political contributions intended		Austin, TX	78783							
			Category (s	See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	OF EXPENDITURE Office Overhead/Rental Ex					-	_		n, TX, officeholder living ex	kpense
							Austin apartmen	ıt util	iities		
9	Complete ONLV if direct	Car	ndidato/Offica	holder nama			Office sought			Office hold	
J	Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH					Office sought Office held					
	Date		Payee name								
L	06/02/2023		City of Austin								
	Amount (\$)		Payee address; City; State; Zip Code								
	\$97.27 P.O. Box 2267										
	Reimbursement from political contributions intended		Austin, TX	78783							
	PURPOSE OF			-	ted at the top of this	schedule)	Description	≓		outside of Texas. Comple	
EXPENDITURE			Office Overhead/Rental Expense			Check if Austin, TX, officeholder living expense Austin apartment utilities					
							Ausun apartmen	ıt Utll	nues		
Complete <u>ONLY</u> if direct expenditure to benefit			ndidate/Office	holder name			Office sought			Office held	
	C/OH										
F	Date	Г	Payee name								
	03/18/2023		Costco								
	Amount (\$)	\vdash	Payee addre	ss; City;	Sta	ate; Zip C	ode				
	\$125.66		3836 Richn								
	Reimbursement from										
	X political contributions intended		Houston, T	X 77046							
	PURPOSE	T	Category (s	ee Categories lis	ted at the top of this	schedule)	Description	Ch	eck if travel	outside of Texas. Comple	ete Schedule T.
OF EXPENDITURE			Office Overhead/Rental Expense						kpense		
	-						Office supplies				
	Complete ONLY if direct	Car	adidata/Office -	holder name			Office courte			Office held	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	car	ndidate/Office	noluer name			Office sought			Office held	

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	- Gift/Awa Committee Legal Se	verage Expense rds/Memorials Expense rvices struction Guide explains		pense /ages/Contract Labor	Travel	in District Out of District R (enter a category not listed above)			
1	Total pages Schedule G: Sch: 6/8 Rpt: 88/90	2 FILER NAME Johnson, Ann (Th	e Honorable)	3 Filer I 0006	,					
4	Date	5 Payee name				<u> </u>				
	06/22/2023	Costco								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$68.77	3836 Richmond Ave.								
	Reimbursement from political contributions intended	Houston, TX 7704	16							
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	Event Expense				Check if A	ustin, TX, officeholder living expense			
			Pride parade supplies							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	02/07/2023	Google								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$25.58	1600 Amphitheatr	е							
	Reimbursement from political contributions intended	Mountain View, T	× 94043							
	PURPOSE	Category (See Catego	ories listed at the top of this sch	edule)	Description	≓	avel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Overhead/F	Rental Expense		Check if Austin, TX, officeholder living expense					
					GSuite services					
_	Complete ONLY if direct	Candidate/Officeholder i	name		Office sought		Office held			
	expenditure to benefit C/OH	sandidato, emberiolaer i	iamo		Omoc oougin		Cinico ficia			
	Date	Payee name								
	02/11/2023	Google								
	Amount (\$)	Payee address;	•	Zip Co	de					
	\$24.00	1600 Amphitheatr	e							
	Reimbursement from political contributions intended	Mountain View, T	X 94043							
	PURPOSE	Category (See Catego	ories listed at the top of this sch	edule)	Description	=	avel outside of Texas. Complete Schedule T.			
	OF EXPENDITURE	Office Overhead/F	Rental Expense		Check if Austin, TX, officeholder living expense					
					Domain name re	newal				
	Complete ONLY if direct	`andidato/Officeholder	namo		Office cought		Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder i	iant		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 Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Contributions/ Donations Made By -Travel Out of District 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: 7/8 Rpt: 89/90 Johnson, Ann (The Honorable) 00067972 Date Payee name 03/07/2023 Google Payee address; Amount (\$) City; State; Zip Code \$25.58 1600 Amphitheatre Reimbursement from political contributions Х intended Mountain View, TX 94043 **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 Office Overhead/Rental Expense **EXPENDITURE** GSuite services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/07/2023 Google Amount (\$) Payee address; City; State; Zip Code \$25.58 1600 Amphitheatre Reimbursement from political contributions Χ Mountain View, TX 94043 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 Office Overhead/Rental Expense **EXPENDITURE** Domain name renewals Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/08/2023 Google Payee address; City; State; Zip Code Amount (\$) \$25.58 1600 Amphitheatre Reimbursement from

Mountain View, TX 94043

Candidate/Officeholder name

Office Overhead/Rental Expense

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

Χ

C/OH

political contributions intended

Complete ONLY if direct

expenditure to benefit

PURPOSE

OF

EXPENDITURE

Description

GSuite services

Office sought

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

Office held

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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
OTHER (enter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Gift/Awards/Memorials Expense Legal Services		Wages/Contract Labor		Travel Out of District OTHER (enter a category not listed above)				
			The Instruction Guide explair	is now to co	ompiete this form.	_					
1	Total pages Schedule G: Sch: 8/8 Rpt: 90/90	2 FILER NAME Johnson, Ann (The Honorable)					Filer ID (Ethics Commission Filers) 00067972				
4	Date	Payee na	me								
	05/14/2023	HEB									
6	Amount (\$) \$108.55	Payee add	•								
		1000 L0	13t 41 St.								
	X Reimbursement from political contributions intended	Austin, T	X 78751								
8	PURPOSE) Category	(See Categories listed at the top of this s	schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Office O	verhead/Rental Expense			Ch	neck if Austin, TX, officeholder living expense				
	EXPENDITORE				Austin office sup	pplies					
9	Complete ONLY if direct expenditure to benefit C/OH	penditure to benefit				t Office held					
	Date	Payee na	me								
	06/23/2023	Michael's									
	Amount (\$)	Payee address; City; State; Zip Code									
	\$14.93	3201 Be	e Caves Rd.	·							
	Reimbursement from										
	X political contributions intended	Austin, T	X 78746								
	PURPOSE	Category	(See Categories listed at the top of this s	schedule)	Description	_	neck if travel outside of Texas. Complete Schedule T.				
OF EXPENDITURE		Event Ex	pense		Check if Austin, TX, officeholder living expense						
	Pride parade su						ipplies				
	Complete ONLY if direct expenditure to benefit	andidate/Off	iceholder name		Office sought		Office held				
	C/OH										
	Date	Payee na	me								
	03/26/2023	Walmart									
	Amount (\$)	Payee ad	dress; City; Sta	te; Zip Co	ode						
	\$348.81	5405 S. I	Rice Ave.								
	X Reimbursement from political contributions intended	Houston.	, TX 77081								
	PURPOSE		(See Categories listed at the top of this s	chodulo)	Description	1 Ch	neck if travel outside of Texas. Complete Schedule T.				
	OF			scriedule)	Description	=	neck if Austin, TX, officeholder living expense				
EXPENDITURE Office Overhead/Rental Expense Office supplies											
					Cinco cappiles						
	Complete ONLY if direct	ndidate/Off	iceholder name		Office sought		Office held				
	expenditure to benefit C/OH				 						